

LUNACY—IRELAND.

THE
FORTY-THIRD REPORT
(WITH APPENDICES)
OF THE
INSPECTORS OF LUNATICS
(IRELAND).

As ordered by the House of Commons, by Command of Her Majesty.



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LUNACY—IRELAND.

THE
FORTY-THIRD REPORT

(WITH APPENDICES)

OF THE

INSPECTORS OF LUNATICS
(IRELAND).

Presented to both Houses of Parliament by Command of Her Majesty.



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1894,

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DUBLIN CASTLE,

26th July, 1894.

GENTLEMEN,

I have to acknowledge the receipt of your letter of the 26th instant forwarding, for submission to His Excellency the Lord Lieutenant, the Annual Report on the Condition and Management of Lunatics and Lunatic Asylums throughout Ireland during the year 1893.

I am,

Gentlemen,

Your obedient Servant,

D. HARREL.

The Inspectors of Lunatics,

Dublin Castle.

FORTY-THIRD REPORT

OF THE

INSPECTORS OF LUNATICS

ON THE

DISTRICT, CRIMINAL,

AND

PRIVATE LUNATIC ASYLUMS

IN IRELAND.

TO HIS EXCELLENCY ROBERT OFFLEY ASHBURTON
CREWE MILNES, BARON HOUGHTON,

LORD LIEUTENANT-GENERAL AND GENERAL GOVERNOR OF IRELAND.

Lunacy Office,
Dublin Castle, 1st July, 1894.

MAY IT PLEASE YOUR EXCELLENCY,

We have the honour to lay before you the Forty-third Annual Report on the condition and management of lunatics and lunatic asylums throughout Ireland during the year 1893.

The following Table shows the number and distribution of the insane in Establishments on the 1st January, 1894, as compared with the number and distribution on 1st January, 1893 :—

Number and
distribution of
the insane.

| | On 1st January, 1893. | | | On 1st January, 1894. | | |
|------------------------------------|-----------------------|----------|--------|-----------------------|----------|--------|
| | Males. | Females. | Total. | Males. | Females. | Total. |
| In District Asylums, | 6,001 | 5,502 | 11,133 | 6,818 | 5,916 | 12,434 |
| Central Asylum, Dundrum, | 128 | 21 | 149 | 130 | 26 | 156 |
| Private Asylums, | 275 | 369 | 644 | 281 | 361 | 642 |
| Workhouses, | 1,701 | 2,497 | 4,198 | 1,718 | 2,226 | 4,044 |
| Goals, | — | — | — | — | — | — |
| | 8,705 | 8,419 | 17,124 | 8,947 | 8,229 | 17,276 |

These numbers, as pointed out in former reports, do not take into account five Government patients residing at the Stewart Institution, nor are the numbers of the insane residing in private dwellings or wandering at large included.

It thus appears that the persons of unsound mind in Ireland of whom we have official cognisance on January 1st, 1894, were

supported as follows:—642 were maintained out of private funds, 16,478 were supported either in District Asylums or Workhouses, some few at their own expense, but, practically, either wholly or partly out of public rates, while 156 in the Criminal Asylum were charged to the expense of the State.

Increase of
insanity.

The following is an analysis of the changes in the numbers and distribution of the insane on January 1st last, as compared with January 1st, 1893:—

The numbers in District Asylums have increased by 301.

“ in the Criminal Asylum “ by 7.
“ in Private Asylums, a decrease of 2 has taken place.
“ in Workhouses, “ 154 “ “

showing at the beginning of the year an increase of 152 above the number under care on January 1st, 1893. This increase is very much below that of previous years, the increment of the previous year having been 436, and the average increase for the past ten years 330, showing that the very rapid influx of the insane to District Asylums and Workhouses has for the past year been somewhat modified.

Although it is to be hoped that the yearly increase which has been taking place in the past in the numbers admitted to District Asylums may never again attain the same alarming proportion, still we are compelled to fear that the number of admissions must go on increasing for some years to come, and especially must this be true as regards the female insane. We know that in other countries the proportion of females to males rather preponderates, and in our Workhouses the number of female lunatics is larger than that of the men, while in District Asylums the reverse is the case. This can only be due to the difficulties of obtaining admission to District Asylums. Admission is now generally obtained only under the Dangerous Lunatics Act, and to obviate the exposure and trouble incurred by having recourse to the provisions of this Act, the friends prefer, if it can possibly be done, to keep their female insane relatives at home.

The following statement, taken from the General Report, Part II. of the Census Commissioners, shows the number of lunatics and idiots in 1851, 1861, 1871, 1881, and 1891 at large, in asylums, in prisons, and in workhouses, as returned in the Census Forms:—

| Years. | Lunatics. | | | | | Idiots. | | | | | Total Lunatics and Idiots. |
|-----------|--------------|----------------|----------------|------------------------|--------|--------------|----------------|----------------|------------------------|--------|-------------------------------------|
| | At Large. | In Asylums. | In Prisons. | In Work- houses. | Total. | At Large. | In Asylums. | In Prisons. | In Work- houses. | Total. | |
| 1851, . . | 1,073 | 3,234 | 273 | 494 | 5,074 | 2,562 | 202 | 13 | 1,129 | 4,906 | 9,980 |
| 1861, . . | 1,602 | 4,623 | 273 | 577 | 7,055 | 5,675 | 403 | 21 | 934 | 7,033 | 14,088 |
| 1871, . . | 1,343 | 7,141 | 5 | 1,874 | 9,763 | 5,157 | 410 | 2 | 1,183 | 6,742 | 16,505 |
| 1881, . . | 943 | 7,527 | - | 1,584 | 9,374 | 4,563 | 1,896 | - | 2,135 | 8,039 | 18,413 |
| 1891, . . | 890 | 11,295 | - | 2,787 | 14,945 | 4,077 | 966 | - | 1,170 | 6,243 | 21,188 |

"From the foregoing it will be observed that the number of lunatics returned in 1891 was nearly treble the number in 1851, and that the increase between 1881 and 1891 was from 9,774 to 14,945, there having been an increase of 3,718 in the number of lunatics in asylums, and of 1,503 in the number of those in workhouses, whilst there was a decrease of 50 in the number at large. There was a decrease of 2,396 in the number of idiots returned in 1891, compared with the number in 1881; a decrease of 900 appears to have occurred in the number in asylums, a decrease of 1,025 in the number in workhouses; and of 471 in the number at large.

Increase of
insanity.

"The total number of lunatics and idiots returned on the Census Forms in 1851, amounted to 9,980; in 1861, to 14,098; in 1871, to 16,505; in 1881, to 18,413; and in 1891, to 21,188."

The variations in the relative numbers of lunatics and idiots thus returned by the Census Commissioners are, in our opinion, due in some measure to a difference in classification, many of those now included as lunatics being formerly returned as idiots.

"The total number of lunatics and idiots returned in 1851 was equal to a ratio of 1 in 657 of the population; in 1861, to 1 in 411; in 1871, to 1 in 328; in 1881, to 1 in 281; and on the present occasion, to 1 in 212, the ratio in the Province of Leinster being 1 in 202; in Munster, 1 in 197; in Ulster, 1 in 264; and in Connaught, 1 in 258. The counties having the highest ratios were—Meath, 1 in 126; Carlow and Kilkenny, each 1 in 149; Westmeath, 1 in 157; Waterford, 1 in 160; Clare, 1 in 168; and King's, 1 in 173. The following counties had the lowest ratios—Down, 1 in 333; Antrim, 1 in 310; Dublin, 1 in 284; Mayo, 1 in 282; Kerry, 1 in 270; Galway, 1 in 269; Donegal, 1 in 157; and Louth and County of the Town of Drogheda, 1 in 251."

The following Return shows the Proportion of Lunatics *under care* per 100,000 of the estimated Population for each Year from 1880 to 1893:—

| YEARS. | Estimated Population. | Number of Lunatics under care. | Proportion per 100,000 of Estimated Population. |
|-------------|-----------------------|--------------------------------|---|
| 1880, . . . | 5,202,648 | 12,982 | 249 |
| 1881, . . . | 5,144,983 | 13,326 | 259 |
| 1882, . . . | 5,087,853 | 13,704 | 268 |
| 1883, . . . | 5,045,282 | 13,961 | 278 |
| 1884, . . . | 4,992,570 | 14,378 | 285 |
| 1885, . . . | 4,931,342 | 14,307 | 290 |
| 1886, . . . | 4,880,498 | 14,520 | 298 |
| 1887, . . . | 4,837,313 | 15,147 | 313 |
| 1888, . . . | 4,777,631 | 15,581 | 325 |
| 1889, . . . | 4,730,566 | 16,026 | 338 |
| 1890, . . . | 4,688,308 | 16,251 | 346 |
| 1891, . . . | 4,704,750 | 16,688 | 355 |
| 1892, . . . | 4,638,175 | 17,121 | 369 |
| 1893, . . . | 4,615,120 | 17,376 | 374 |

Increase of
insanity.

This table shows that the number of the insane has increased from 249 per 100,000 of the population in 1880, to 374 per 100,000 in 1893. If to this be added the number of the insane wandering at large, according to the Census Returns of 1891, the number would be found to amount to 482.

During the earlier months of the present year, by the direction of the Chief Secretary, we were engaged in obtaining statistics from the Medical Superintendents of the various district asylums on the alleged increase of insanity in this country, and obtaining their opinions, founded on long experience, as to the causes which go to explain this increase. These reports will be found in *extenso* in Appendix G.

The CONCLUSIONS at which we then arrived, are as follows :—

- (1.) That the great increase of the insane under care is mainly due to ACCUMULATION, and is, so far, an apparent and not a real increase.

We desire to give the first place in the present enumeration of our conclusions to this particular source of causation, viz :—the yearly growing tendency to a progressive increase of asylum population as the necessary result of simple accumulation, (1) because it is almost everywhere regarded as constituting the prime factor in the case, and (2) because we apprehend that the important influence it exercises is but very imperfectly understood or appreciated by the public generally. The difference experienced in regard to this in hospitals for the insane, as compared with those devoted to the treatment of ordinary disease, is a very broad one, and is so clearly defined in the carefully prepared report of the Medical Superintendent of the Enniscorthy District Asylum that we venture to here submit a short quotation from his observations, which fully embody our own views on the subject. He says :—

“The immediate cause of the continuous increase of the asylum population is of course the preponderance each year of the admissions over discharges and deaths combined. THE CONDITIONS DIFFER FROM THOSE OF ORDINARY HOSPITALS, in which, if a patient does not recover, and fails to improve after a fair period of treatment, he is discharged as incurable. But in an asylum *all the incurable have to be kept on as permanent patients*, except a few which may be sent to workhouses ; so that from the nature of things an asylum population must perforce go on increasing until the admissions are balanced by an equal number of discharges and deaths : a condition of things the occurrence of which is only a remote possibility at present. Were all the other hospitals for the sick conducted on the same principle (unavoidable in the case of asylums), they too would be rapidly overcrowded with occupants, and, like asylums there would be an ever-recurring necessity of adding to their accommodation by structural additions. This peculiarity connected with asylum economy is one apt to be lost sight of, or at least not to receive the attention which it deserves.”

- (2.) That the yearly increase of admissions is drawn in a considerable proportion of the cases from the reserve of UNREGISTERED INSANE existing throughout the

country, as shown by the reduction in the number of lunatics and idiots at large given in the Census Returns for 1891, as compared with 1881. Increase of insanity.

- (3.) That the annual increase in the face of a shrinking population of the number of FIRST ADMISSIONS, including as it does such a large proportion of FIRST ATTACKS, of insanity, almost irresistibly points to SOME increase of occurring insanity in particular districts.
- (4.) That the main factors which contribute to the development of occurring insanity in this country may be classed as:—
- (a.) HEREDITY.

We need hardly point out that hereditary influence largely preponderates over all other existing causes of insanity; as stated by Darwin, it is only too certain that insanity and deteriorated mental powers run in the same families.

- (b.) CONSANGUINEOUS MARRIAGES among those having any tendency to nervous disease.

This is illustrated by the prevalence of insanity in certain secluded valleys in the West and South of Ireland, where inter-marriage is common. On the other hand its absence under like conditions where there is no instability of nervous constitution in the families of either parent is shown by the infrequency of insanity among the population of Tory Island off the coast of Donegal, referred to in the report of the Medical Superintendent of Letterkenny Asylum.

- (c.) THE INNUTRITIOUS DIETARY of the poorer population tending to produce anæmia and constitutional weakness, which favour the development of scrofulous and neurotic disease.
- (d.) THE IMMODERATE USE OF CERTAIN NERVOUS STIMULANTS, such as alcohol, ether, tea, and tobacco.

ALCOHOL may as is well known act as a direct cause of insanity, but it more frequently transmits an hereditary tendency to the production of nervous disease.

ETHER DRINKING obtains over a very limited area of this country, and so can have played but a small part in the causation of insanity.

While the moderate use of properly prepared Tea is regarded as innocuous or even beneficial in its action on the nervous system, its ill-effects when decocted or over infused on persons who make it their staple article of dietary are dwelt on by almost all the Resident Medical Superintendents in their several reports. Undoubtedly the method of preparation adopted, and the excessive use of this article of diet, now so general, among our poorer population, tends to the production of dyspepsia, which in its turn leads to states of mental depression highly favourable to the production of

Increase of
insanity.

various forms of neurotic disturbance. The excessive use of tobacco also, especially among the young, whether by smoking or chewing, in the opinion of certain of our Medical Superintendents, acts, though perhaps in a minor degree, injuriously on the nervous centres.

- (e.) One further contributory influence in the increase of insanity dwelt on in some of the reports remains to be here specially noticed by us, namely that of the ACUTE AGRICULTURAL DEPRESSION AND DISLOCATION so widely experienced in recent years, and the great mental strain and harassing anxieties that have followed in their wake.

In illustration of the reality of this as a causative element reference is made in the excellent report furnished by the Medical Superintendent of the Armagh Asylum to the SUGGESTIVE FACT, that of patients admitted during the last ten years, as many as 349 belonged to the agricultural population, while only 28 were drawn from the artisan and commercial classes.

In this connection we desire to observe that in our Forty-first Annual Report it is stated that we felt driven by the facts then before us to conclude that the large increase of lunacy indicated by the returns then under review had been *absolute* as well as *relative*, and in our Forty-second Report of the following year, after analysing the various reasons urged in support of the view that this increase was only apparent, and not real, we took occasion to add that, while the causes assigned must be regarded as accounting for a very large relative increase of insanity, we felt constrained to adhere to our previously expressed opinion that they were not sufficient to explain the entire of the increase experienced in this country during recent years.

The main factor on which this conclusion was based was the large and continuing increase experienced in the great majority of the districts in the number of *first* admissions to the asylums, and if *first admissions* and *first attacks* could be read as being convertible terms, the inference so drawn from the recorded facts then before us would have been a perfectly just and reasonable one—the number of first admissions during the period 1880-1893 having risen from 1,925 in the first year of the series to 2,415 in the last: this being equivalent to an increase of 494, or a little over 25 per cent., within the years quoted, and during the course of which the general population of the country had experienced a sensible and continuous decline.

This, however, is precisely the point at which reliable information has been found to fail us in our investigation, and without a full and accurate history of the cases included in the returns it would be obviously unsafe to come to any GENERAL and positive conclusion on this highly debatable subject.

Thus of the total number of 22,752 first admissions during the decade 1883-92, about 12 per cent. of the entire, consisted of cases transferred to the asylums from the workhouses, which, in the vast majority of them, had presumably been under care for more or less protracted terms, while of the remainder it can hardly be doubted that if an accurate knowledge of the actual facts was attainable, many would prove to have been more or less mentally affected long anterior to the period of their reception into the asylum.

The considerations just indicated, and the contents of the exceedingly careful and valuable reports furnished to us by the several resident medical superintendents in the early part of the present year, have, after the fullest consideration we have been able to bestow on the subject, led us to modify to a certain extent the view originally formed by us on this question. We have in the special report furnished by us in February last to the Chief Secretary, when submitting an abstract of the information supplied to us by the resident medical superintendents, explained the precise extent to which our original impression as to the **ABSOLUTE** increase of insanity, as conveyed in our 41st and 42nd Reports, had been qualified by subsequent experience, in the following terms, viz. :—

"The facts and statistics we have as yet obtained, and the reports of the different Resident Medical Superintendents throughout Ireland do not justify us in positively stating, with any pretence to scientific accuracy, that conclusive proof exists that any general increase of insanity has taken place in this country. This arises chiefly from the insufficiency of lunacy statistics. The needed information either does not exist, or, when it appears to exist, proves on examination to be imperfect.

Nevertheless, the ever-increasing proportion of the insane, and the steady yearly advance in the number of first admissions, point to the conclusion that some absolute increase of insanity is taking place in certain districts of this country."

To the conclusion thus described, our subsequent inquiries do not so far enable us to make any very material addition on the present occasion, but, as bearing both on the general question at issue, and on the assumed recent preponderance of insanity in Ireland as compared with England, we take leave to give here a few short quotations from a most able and exhaustive paper, on the entire subject, read at the recent meeting in Dublin of the Royal Medico-Psychological Society of Great Britain and Ireland, by Dr. Draper, Resident Medical Superintendent of the Ennisorthy District Lunatic Asylum.

"The net result then of this examination is to show that, while there is an undoubted increase in occurring insanity, as indicated by the records of first admissions, by far the larger part of the apparent increase of insanity generally is due to accumulation; and that the seeming preponderance of insanity in Ireland as compared with England, is fictitious, and depends entirely upon the greater amount of accumulation in Ireland occasioned by the lower death-rate in that country, and (possibly) the lower rate of discharge of the unrecovered."

Increase of
insanity.

"The death rate in English County and Borough Asylums, taking the average of the last five years has been 10·211, that in Irish District Asylums only 7·8 per cent. on the daily average. If the English death rate had prevailed in Irish Asylums during the past five years, the deaths would have numbered 5,736, instead of 4,384. In other words, 1,352 persons were alive in Irish Asylums on the 31st December, 1892, more than would have been had the rate of mortality been the same as in English Asylums. Now the number of patients in district asylums increased from 1887 to 1892, by 1,654, and if we deduct from this the number that would have died, over and above the actual deaths, had the English death rate prevailed (1,352), the increment is reduced to the comparatively insignificant one of 282 in a period of five years, or a rise of only 2·68 instead of 15·56 per cent. as it really was. It would appear, therefore, that the apparent preponderance of insanity in Ireland, as compared with England, is mainly, if not entirely due to the lower death rate in the former country."

A further element adverted to in Dr. Drapes' paper in explanation of the greater preponderance in the number of asylum inmates in Ireland as compared with England, to which he draws attention as follows, is that relating to the relative rates of discharges in the two countries :—

"As regards the discharge rate, we find it is considerably higher in England than in Ireland. During the quinquennium, 1883-1887, the total discharges in Ireland were 59·26 per cent. of the admissions; in the last quinquennium they were 59·94, and for the whole decade 59·61. In England the proportion for the two quinquennia was 61·12 and 63·46, respectively, and for the whole decade 62·38, so that while the rate in Ireland remains fairly constant, that in England is on the increase."

From the figures last quoted it is obvious that the two particular factors adverted to by Dr. Drapes furnish in themselves a very full and sufficient explanation of the greater accumulation of insanity in the Irish as compared with the English asylums.

Age distribu-
tion.

An additional and most important element in connection with the question as to the increased prevalence of lunacy in Ireland is that relating to the age distribution of the insane. With respect to this aspect of the case, we beg to submit a tabular statement showing the age distribution of the insane in Ireland during the census periods of 1871, 1881, and 1891, respectively, from which it will be seen that while a decline has taken place in the number under the age of 45 between 1871 and 1891, there has been, on the other hand, a marked increase in those exceeding that age for the same period; a fact clearly indicating that the progressive increase observed in the number of the insane throughout the country is in a large measure due to the prolongation of life experienced amongst the mentally afflicted classes.

PROPORTIONAL AGE DISTRIBUTION of the total Insane at the Census Periods, 1871, 1881, and 1891.

| — | 1871 | 1881 | 1891 |
|-------------------------|-------|-------|-------|
| All ages, | 1,000 | 1,000 | 1,000 |
| 0-15 years, | 72 | 52 | 36 |
| 15-25 years, | 158 | 131 | 118 |
| 25-45 years, | 418 | 450 | 436 |
| 45-65 years, | 228 | 285 | 334 |
| 65 years and upwards, . | 64 | 79 | 85 |

DISTRICT ASYLUMS.

DISTRICT
ASYLUMS.

On the 31st December, 1893, the number of the insane resident in these institutions was 12,434—6,818 men, and 5,616 women.

During the year 1893 the admissions amounted to 3,207; of these 749 were re-admissions, while 2,458 were admitted for the first time.

The following Table gives the admissions to District Asylums for each year since 1880, and shows the number of first admissions, and also the number of re-admissions:—

| Years. | First Admissions. | Re-Admissions. | Total Admitted. |
|---------------|-------------------|----------------|-----------------|
| 1880, | 1,925 | 411 | 2,336 |
| 1881, | 2,044 | 458 | 2,502 |
| 1882, | 2,137 | 508 | 2,645 |
| 1883, | 2,155 | 519 | 2,704 |
| 1884, | 2,200 | 527 | 2,726 |
| 1885, | 2,240 | 610 | 2,850 |
| 1886, | 2,140 | 606 | 2,746 |
| 1887, | 2,243 | 629 | 2,863 |
| 1888, | 2,190 | 631 | 2,821 |
| 1889, | 2,329 | 627 | 2,956 |
| 1890, | 2,451 | 644 | 3,095 |
| 1891, | 2,350 | 650 | 3,010 |
| 1892, | 2,415 | 766 | 3,181 |
| 1893, | 2,458 | 749 | 3,207 |

Of the admissions 2,343 were sent to their district asylums under the provisions of the Dangerous Lunatic Act, while only 864 were admitted in accordance with the forms prescribed by the Privy Council Rule.

1,239 patients—678 men, and 561 women—were discharged

Discharges.

DISTRICT
ASYLUMS.

recovered, giving a percentage on the admissions of 39.0 for men, and 38.1 for women. 580 patients were discharged unrecovered.

We pointed out in last year's report that owing to the absence of any law of settlement, no transfer from one district asylum to another can be made, and therefore it is not necessary to take transfers into consideration.

During the year 1,076 patients died—515 men and 561 women—giving a proportion per cent. to daily average number resident of 8.7.

Imperial
contributions
towards
maintenance.

The contribution from Imperial Funds toward the maintenance of pauper lunatics for each of the years from 1875 to 1893, during which the Parliamentary Grant has been in operation, is shown in the following Table:—

| For the Year. | Amount of the Contribution from Imperial Sources towards the maintenance of Lunatics in the District Asylums of Ireland. | Daily Average Number Resident. |
|-----------------|--|--------------------------------|
| 1875, | £ 66,948 | 7,092 |
| 1876, | 77,567 | 7,943 |
| 1877, | 80,380 | 8,102 |
| 1878, | 82,054 | 8,306 |
| 1879, | 84,810 | 8,423 |
| 1880, | 85,841 | 8,545 |
| 1881, | 87,320 | 8,704 |
| 1882, | 89,425 | 9,170 |
| 1883, | 92,867 | 9,455 |
| 1884, | 94,560 | 9,619 |
| 1885, | 96,608 | 9,781 |
| 1886, | 99,609 | 9,998 |
| 1887, | 101,809 | 10,203 |
| 1888, | 103,993 | 10,601 |
| 1889, | 109,118 | 11,009 |
| 1890, | 112,311 | 11,297 |
| 1891, | 111,000 | 11,644 |
| 1892, | 112,050 | 11,933 |
| 1893, | 119,721 | 12,207 |

Owing to the growing increase from year to year of the amount of this vote for pauper lunatics the Treasury directed special inquiries to be made into the cause of the increase in the face of a diminution of the population. This subject will be found dealt with in the Report of the Mitchell Commission on Lunacy Administration in Ireland. It was there pointed out that the increase is largely due to the accumulation in District Asylums.

Having regard to the very great remission of local taxation through this vote an important circular dated 16th March, 1893, was issued and will be found in Appendix H., calling attention to the conditions under which this large and generous contribution from the Imperial Treasury—which consists of monies voted annually on Estimates prepared by the Lords of the Treasury—was made to the support of pauper lunatics. This contribution was granted not only as a relief to local taxation, but still more as a means for improving the condition and treatment of the insane poor, and it pre-supposes a certain standard of care and comfort which, if persistently withheld, in any particular district, would render it incumbent on their Lordships to withhold from such district the whole or part of this contribution.

During the past year, instead of any increase, a slight diminution in the amount contributed from private sources for the support of inmates in these institutions has been experienced. In previous reports we drew attention to the strikingly small sums thus contributed, and also to the very great contrast exhibited in this respect in Scotland. In these reports we have pointed out the several causes which tended to produce this very unsatisfactory result. One of these was the fact that the Treasury refuse to contribute where the incidence of taxation on a county, is, in addition to the family contribution, less than 4s. a week, and we ventured to make the suggestion that the Treasury should in all cases pay half the net costs of maintenance remaining after the family contribution had been deducted. We think that this course would prove a very strong incentive to the local authority to create as many paying patients as possible, and so in the long run benefit, through the increased number of families contributing something towards the support of their relatives, the Imperial Treasury as well as the local ratepayers. In illustration of our meaning, it may be observed that in the case of a patient whose net capitation maintenance costs £22 a year, and whose family contribution is £12, the difference (£10), representing less than 4s. a week, falls altogether on the local rates; whereas, if our suggestion were adopted, the ratepayers would only have to pay £5, a difference sufficiently important to supply the local authorities with a strong incentive to make every effort to realise this additional source of income.

DISTRICT
ASYLUMS.

Contributions
from paying
patients.

SUICIDES AND ACCIDENTS.

The total number of deaths by suicide which have occurred during the year in District Asylums in Ireland amounts to five. The detailed account of these and of the serious accidents is as follows:—

At BALLINASLOE, P. H., an old inmate, had been employed for years in the kitchen; he was quiet and harmless, and was not supposed to have any suicidal tendencies. On the evening of the 8th March he was found hanging from a rafter at the back of the engine-house by a short piece of rope which he had attached to the beam. The coroner's jury considered that no blame was attachable to any of the attendants, and in that opinion we felt bound to concur.

At BELFAST, a patient (W. G.) cut his throat while at breakfast. He had been lately admitted from the Ballymena Workhouse, where he had made a previous attempt on his life. On the morning of the 19th February the attendant left him in the infirmary day-room, eating breakfast, and on returning from the kitchen found him lying on the ground with his throat cut. Afterwards a piece of iron hoop was found with which he is supposed to have inflicted the wound.

At the same Asylum a patient (F. G.) met with fatal injuries by an accidental fall from the farm cart.

DISTRICT
ASYLUMS.
—
SUICIDES
and
ACCIDENTS.
—
Cork.

At CORK, on the 5th August, 1893, a patient (D. C.), while at exercise in a yard, was seen to cross the wall. He was followed at once, and kept in view while crossing the Asylum grounds. He scaled the wall of the city reservoir, and immediately jumped into the water. His body never rose, and was not found for some hours afterwards.

At the same Asylum, on the 1st February, 1893, H. P. died under the following circumstances:—This patient, a general paralytic, was, at the time of the fatal casualty, helpless, noisy, and incoherent. On the attendant bringing in tea to the ward, on the evening of the 29th January, the patient rushed to the can, and endeavoured to put his hand into it. A struggle took place, when the attendant strove to place the patient in the padded room, during which he fell heavily to the ground. The patient died three days afterwards, and after death four ribs were found fractured. The verdict of the coroner's jury was:—"That the deceased died in the Cork District Lunatic Asylum on the 1st instant, and that death resulted from injuries caused by fracture of his ribs." The attendant was afterwards tried at the Assizes, but was acquitted. We, however, after a careful consideration of the case at the Asylum, reported to the Governors that, taking the mildest view of the case, we did not consider the attendant a suitable person to have charge of the insane, and he was accordingly dismissed.

Ennis.

At ENNIS, a patient (M. Q.) was found to have hanged himself from the top rail of his bed. He was seen repeatedly during the night by the attendant, but on the last visit he was found to have hanged himself with his sheet. In this Asylum there is no continuous night supervision, nor is there any head attendant during the day.

Limerick.

At the LIMERICK Asylum, J. M. inflicted a dangerous wound on himself. He was working in the shoemakers' shop, and went out to the water-closet. After some time search was made for him, and he was found to have amputated his penis and laid bare his testicles with the shoemaker's knife with which he had been working; he, however, made a good recovery.

Omagh.

At the TYRONE Asylum an inquest was held in the case of an old patient on whose body marks were found after death. The verdict of the coroner's jury was as follows:—"That death resulted from senile atrophy, accelerated by injuries from another patient."

Richmond

At the RICHMOND Asylum a male patient (J. M.), when dressing himself in the morning, received a kick in the abdomen from another patient. He died shortly afterwards, with symptoms of rupture of the bladder. At the *post-mortem* this was found to be the case, and a verdict to that effect was returned by the coroner's jury. The jury added:—

"We are unanimously of opinion that the liability to such occurrences as the above would be greatly lessened by providing the accommodation which the evidence in this case proves is so urgently needed to relieve the existing overcrowding, and also by providing a greater number of paid attendants."

ACCOMMODATION.

DISTRICT
ASYLUMS.ACCOMMODA-
TION.

The rapidly increasing number of the insane in Ireland seeking accommodation in District Asylums has rendered the provisions originally made for their care and treatment utterly inadequate. Contrasting the number of admissions in the years 1863 and 1893, we find that in the former 1,420 patients were admitted to these institutions, while 3,207 patients were received during the latter year. On the 31st December, 1863, the Irish District Asylums contained 4,672 patients, whereas at the end of December last, 17,276 remained in these institutions. At the present time every District Asylum, with the exception of Cork—recently enlarged—is full to overflowing, and in every district throughout Ireland, with this one exception, additional accommodation is being provided, or is in contemplation, either by adding to the existing buildings, or by erecting new institutions.

A very large expenditure has been incurred in the past, and must be expected to continue for some time to come, until sufficient accommodation for the insane population has been provided. This would have entailed a heavy burden on the ratepayers, had it not been that the Treasury, at the instigation of the Irish Executive, introduced a measure during the present Session of Parliament, extending the time for the repayment of loans for asylum purposes. Up to a short time ago such loans were repayable in 14 years, by an annuity of £9 3s. 4d., per cent. By the Public Works Loans Act of 1883 (46 & 47 Vic., cap. 42), the Treasury had the discretionary power to extend the period to 20 years, the maximum allowed by the above Act, and early in the year 1893, their Lordships, moved by the strong representations of the present Chief Secretary, extended the term to the maximum period.

The Under Secretary, by circular dated 16th March, 1893, drew public attention to this concession, the effect of which was to reduce the annual contribution for these loans from £9 3s. 4d. to £7 0s. 9d.

Substantial as was the relief thus afforded, it still fell short, in our opinion, of what the exigencies of the present time demanded, in view of the exceptionally heavy outlay which, in numerous instances, Boards of Governors have been unavoidably urged to undertake.

Under these circumstances, in a special Report dated 31st October, 1893, addressed by us to the Chief Secretary, we drew attention to this important subject. In that Report, amongst other subjects, we took occasion to point out that while the maximum period allowed for the repayment of loans for asylum purposes was limited to 20 years, other local authorities were, by recent legislation, enabled to obtain such loans on terms much more favourable to the local ratepayers, viz.:—for Labourers Dwellings, and Sanitary Works, &c., for terms of 35 and 50 years. We took leave to draw the Chief Secretary's attention to the great assistance which could not fail to be obtained in the execution of

DISTRICT
ASYLUM.
—
ACCOMMO-
DATION.

the many important buildings now in so many cases imperatively demanded by the increased number of the insane, if the same facilities were extended to loans granted for asylum purposes. In this view we desire to acknowledge the cordial and effective support we experienced at the hands of the Chief Secretary, to whose strong representations on the subject to the Lords Commissioners of Her Majesty's Treasury we feel we are entirely indebted for their Lordships' ultimate concurrence in our recommendations, to which practical effect has been since given by the enactment of the Public Works Loans (No. 3) Act of the Autumn Session of 1893, under the provisions of which loans can now be obtained for asylum purposes by fixed instalments for 35 and 50 years, with interest on the outstanding portion of the loan calculated at the rate of $3\frac{1}{2}$ and $3\frac{3}{4}$ per cent, respectively.

These favourable terms are only to continue so long as the Exchequer will be secured from loss; nevertheless they are such as to confer an inestimable boon, not alone on the hardy-pressed ratepayers, but on all who have an interest in the welfare of the insane poor.

ALTERATIONS AND ADDITIONS.

ALTERATIONS
AND ADDI-
TIONS.

The following are the various alterations, and additions in connection with district asylums which are in progress, or have been completed during the year.

At the ARMAGH Asylum the following alterations have been completed:—

The diningroom has been reconstructed, and an orchestra erected. An attendants' dining-hall has been built, the stores re-arranged, the kitchen re-built, and fitted with cooking appliances; the laundry has been added to, a new drying closet, and disinfecting apparatus supplied; a detached mortuary has also been built, and the entire sanitary arrangements throughout the institution have been reconstructed.

The plans for the new ANTRIM Asylum have been now finally approved of by the Board of Control and the Board of Governors, a site selected, and the contract entered into for building the new asylum, which will accommodate 400 patients, with administrative departments for 600.

A much needed addition to the farm of the BALLINASLOE Asylum was made by the purchase of 160 acres adjoining the asylum. This addition to the land will not alone provide means of employment for the male patients, but will reduce the cost of maintenance by the supply of milk and farm produce at cost price. This asylum is much overcrowded, and after a conference with the Governors it was decided to build a detached hospital, for the treatment of acute and feeble cases, containing 200 beds. This, with the re-arrangement of some parts of the old asylum and new sanitary blocks, will render the institution capable of meeting the requirements of the district.

In consequence of the rapid extension of the City of BELFAST the existing asylum site is now surrounded with buildings, and consequently does not admit of extension at any reasonable cost. Under these circumstances the Governors have determined to obtain a site outside the city, whereon to erect an auxiliary asylum, and propose, when a favourable opportunity offers, to dispose of the existing buildings and estate, which in consequence of the rapid growth of the city have become most valuable.

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ASYLUMS.
—
ALTERATIONS
and
ADDITIONS.

At CARLOW the contract for the necessary additions and alterations of the asylum has been concluded, and the work is now in progress. This includes the erection of a laundry, a new block for the accommodation of male patients, the remodelling of the kitchen and stores, the erection of refectories, the fitting up of sanitary blocks, and laying new sewerage system.

At CLONMEL the works described in our last report are now completed. The new block for sixty women is ready for occupation. This, however, only provides the accommodation required in the immediate present.

At CORK the new building is now partly occupied, but in consequence of the delay in the completion of the connecting passage the accommodation thus provided can only be occupied by quiet and well-behaved patients. New sanitary blocks are at present being erected in the old building, and the laundry is being enlarged and remodelled.

At DOWNPATRICK plans have been prepared for the proposed extension of the female hospital, and the erection of a block for the treatment of acute cases. Further improvements and alterations will be made in the female building in order to provide an observation dormitory, and more day-room space.

At KILKENNY the structural works required at the institution described in a former report are now being carried out. The works include the erection of a chapel, additional accommodation, the re-modelling of the kitchen and laundry, and the introduction of a water softening apparatus.

At LETTERKENNY a contract has been taken for various works. These comprise additional accommodation especially for male patients, a new dining-room, the remodelling of the kitchen and laundry, and the erection of a detached house for the Resident Medical Superintendent. This latter work was found necessary as the existing house takes up part of the accommodation which should be utilised for the patients.

At LIMERICK it is proposed to erect a detached house for the Medical Superintendent, and to convert the present house into additional accommodation for patients, and rooms for the Assistant Medical Officer. This institution is much overcrowded, containing sixty patients over the estimated accommodation. Additional land is also urgently required. At present a boiler-house is being erected which will be fitted with new boilers.

DISTRICT
ASYLUMS.
—
ALTERATIONS
and
ADDITIONS.

At LONDONDERRY, after long and careful consideration, the Governors have decided to abandon the present site, and seek for one where sufficient land can be obtained outside the city. This decision must be highly commended, as the situation of the present institution is such as to render it in some respects unsuitable for the treatment of the insane.

At the Asylum situated at MARYBOROUGH, the Governors decided to provide the additional accommodation so long urged by us. Plans have therefore been prepared for a new male block containing 100 beds. Extensive structural works are at present being carried out, including two new chapels, and the remodeling of the kitchen and dining hall.

The Asylum at MULLINGAR has been for a considerable time in the hands of contractors. The various works which have been carried out are now almost completed. These include the remodelling of the kitchen, which has been fitted with the most modern appliances, the erection of a new laundry and Turkish bath, and the laying of a new sewerage system. Arrangements are now being made to light the whole establishment with electric light. The Governors have wisely decided to obtain additional land, by means of which a saving in maintenance may be reasonably expected.

It has been at length decided to erect a second asylum for the METROPOLITAN DISTRICT at PORTRANE for 1,200 patients, while accommodation in an improved form will be provided at the RICHMOND for 800 inmates. For this purpose the existing male block will be remodelled to accommodate both male and female patients, the detached hospitals enlarged and improved, while the female block, which is so hemmed in by public buildings as to render any large expenditure on it unwise, will be given up.

It is to be hoped that the competition for the plans for the new building at Portrane will be proceeded with without delay, as the overcrowded condition of the Richmond still continues, rendering the management and care of that institution a matter of great anxiety. The workhouses of the Metropolis are also overcrowded with the insane whose condition is far from satisfactory.

The overcrowded condition and the want of proper sanitary arrangements in the SLIGO District Asylum have been frequently dwelt on by us. It has now been decided to obtain plans for the providing of additional accommodation, for the erection of new sanitary blocks, and for remodelling the kitchen, laundry, and stores.

At WATERFORD the contract for the additional accommodation required is being carried out most satisfactorily. Two blocks will be provided, which, when completed, will afford the necessary room. Steps are at present being taken to warm and ventilate the new building on the most modern principles.

THE STATE CRIMINAL ASYLUM.

CRIMINAL
ASYLUM.

The following changes have taken place in the population of the Criminal Asylum during the year:—

| — | Males. | Females. | Total. |
|--|--------|----------|--------|
| 1st January, 1893, | 128 | 21 | 149 |
| Admitted during Year, | 20 | 8 | 28 |
| Total under treatment during Year, | 148 | 29 | 177 |
| Discharged recovered, | 4 | 1 | 5 |
| " improved, | 6 | 1 | 7 |
| " unimproved, | 1 | 1 | 2 |
| Died, | 6 | — | 6 |
| Escapes, | 1 | — | 1 |
| Remaining on 1st January, 1894, | 130 | 26 | 156 |

No suicide, accident, or death from misadventure is reported to have occurred during the year. One escape took place, and the man has not since been captured. The patient, who slept in a dormitory, is said to have removed the bars, then pushed out the sash of his window, and let himself down to the ground with his sheet. The matter was the subject of a prolonged investigation by this office, and two of the attendants were eventually dismissed.

Many structural alterations and improvements have been carried out. The upper wing on the female side has been converted into most excellent sleeping accommodation for male patients, and has been fitted up with a number of single rooms.

A range of shops and stores for tradesmen are now being built. Commodious and suitable detached buildings have been provided for Catholic and Protestant worship. A messroom has been fitted up for the male attendants, and the room formerly utilised for Catholic worship has been converted into a recreation hall. The building of the sanitary annexes is now in progress, and one at least will be completed at an early date.

The report of our inspection will be found in Appendix B.

C

WORKHOUSES.

THE INSANE IN WORKHOUSES.

On the 1st January, 1893, the total number of insane persons residing in workhouses was 4,198, and on the 1st January, 1894, 4,044, showing a decrease of 154 during the year. Through the courtesy of the Local Government Board we have been furnished with a list of the inmates of the lunatic wards of the different workhouses in Ireland on 31st December, 1894. No separate returns of the admissions, discharges, and deaths of the lunatics resident in these institutions are as a rule kept. None of the insane inmates are detained under any legal authority, nor is their insanity vouched for by any medical certificate, except in those cases where contracts have been entered into with the Guardians of four workhouses for the maintenance of a certain number of patients from the neighbouring district asylums, under the provisions of the 38 and 39 Vic., cap. 97, section 9. The following table gives a return of the four workhouses, and the number of the insane located therein:—

| | |
|------------------------|-----|
| Ballymena, | 112 |
| Limavady, | 7 |
| Londonderry, | 1 |
| Ennis, | 18 |
| Total, | 138 |

We must repeat the opinion expressed in our last report that the operation of the section referred to has not tended to the better treatment of the insane poor; and that, although its provisions have served to lessen the overcrowding in some asylums, the condition of the lunatics thus transferred has not been generally satisfactory. Owing to the divided authority between the Board of Governors and the Guardians, neither body has taken sufficient interest in the care of these lunatics, the Governors on the one hand being anxious to free themselves of the responsibility of their care, while the Guardians have looked on the contract as merely a profitable transaction. We believe that the Local Government Board share our opinion as to the unsatisfactory condition of this arrangement, and in some instances even the Guardians would appear anxious to terminate their contract for the care of these insane persons.

The diminution in the numbers resident in Irish workhouses would tend to prove that Boards of Guardians are becoming alive to the fact that by retaining these helpless human beings in their establishments, they are taking on themselves a responsibility not imposed by law, and are now anxious to have the insane transferred, where possible, to the institutions specially provided for their care and treatment under legal enactment.

As regards the general care of the inmates of the lunatic wards, although quite willing to admit that the Guardians at the instance of the Local Government Board, and their Inspectors have, at least in certain cases, striven to improve the condition

of the insane inmates by appointing paid attendants, by improving the dietary, and by providing means of ablution; and although we have to acknowledge the readiness with which our recommendations have been generally considered by the Boards of Guardians, nevertheless we are compelled to reiterate the opinion that the condition of the lunatic inmates is far from satisfactory. The most helpless imbeciles are frequently found ill-attended to, the only persons to look after them being, to a large extent, pauper inmates—the apartments allocated to their use are often dark, ill-ventilated, and badly furnished, whilst the means of securing personal cleanliness are very inadequate.

We are far from wishing it to be understood that no person of unsound mind should be kept in these institutions. We think that many weak-minded persons who, with a little attention, would look after themselves, might be well cared for in these establishments; but unfortunately in nearly all the Irish workhouses the inmates of the lunatic wards are found to be the most helpless imbeciles and demented, who—quite incapable of caring for themselves, unable to feed, wash, or dress themselves, and requiring the most constant and careful supervision—are left to the mercy of a pauper inmate, or, where a paid attendant is attached to the ward, to the care of an official usually ignorant, untrained, and very often negligent of his duty.

We cannot but think that where the lunatic inmates of these wards manifest symptoms that render them obnoxious to others, or where they are so helpless as to require individual care, the lunatic wards of workhouses, as at present constituted, do not provide suitable accommodation for them, and that so long as the law places the responsibility, for the maintenance of the insane, on the Boards of Governors appointed for the management of district asylums, we are of opinion that on these Boards alone should devolve the responsibility of providing for the care of such insane persons.

In our Fortieth Annual Report we stated that—

"One of the greatest requirements in connection with lunacy in Ireland is the establishment of a National Institution for the training and education of idiots and imbeciles, such as are the Larbert and Baldevin Institutions in Scotland, and the Royal Albert and Earlswood Asylums in England. We may estimate roughly that there are not less than 3,000 idiots and imbeciles in Ireland, of whom probably 500 are under fifteen years of age, and at least half of these would be improvable, and derive benefit from the special training in idiot schools; but apart altogether from improvement by training (as pointed out in the case of Scotland in one of the early Scotch Reports), there is a great want in Ireland of an establishment especially adapted for the reception of young idiots, where they would be removed from the neglect and cruel usage they so frequently experience at home, or from the contaminating influence of association with adult lunatics in asylums, or the pauper inmates of Workhouses."

Training
Schools for
Imbecile
Children.

In this connection attention may be here drawn to the Poor Afflicted Persons Relief Act of 1878, 41 and 42 Vic, cap. 60, in which power is given to set apart a workhouse, or any other

WORKHOUSES. building, for the care of imbecile children, and the Guardians of any Union are empowered to send their imbecile children to it, and to pay for their maintenance there any sum not exceeding 5s. per head per week.

Referring to this provision, it occurs to us to suggest that the present requirements of the case might perhaps be sufficiently met by—with the necessary alterations and adaptations—converting one of the existing workhouses to this purpose.

In offering this suggestion, however, our contemplation is that the institution should be placed under the exclusive control, not of the Board of Guardians, but of the Lunacy Department, and that the Government capitation grant of 4s. per week should be allowed in all such cases. We are further of the opinion that when such an institution has been brought into existence it should be made obligatory on Boards of Guardians to send all their imbecile children to it, paying for them there at the specified rate of 5s. per week.

We have the honour to be

Your Excellency's obedient servants,

GEO. PLUNKETT O'FARRELL,

E. MAZIERE COURTENAY

*Inspectors of Lunatics and
Commissioners of Control.*

THE REPORT
OF THE
INSPECTORS OF LUNATICS (IRELAND)

ON

THE HOUSES LICENSED UNDER 5 AND 6 VIC., CAP. 123,
FOR THE YEAR ENDED 31ST DECEMBER, 1893.

TO HIS EXCELLENCY ROBERT OFFLEY ASHBURTON
CREWE MILNES, BARON HOUGHTON,

LORD LIEUTENANT-GENERAL AND GENERAL GOVERNOR OF IRELAND,

AND

TO THE RIGHT HONORABLE SAMUEL WALKER, P.C.,

LORD HIGH CHANCELLOR OF IRELAND.

The 35th section of 5 and 6 Vict., cap. 123, requires the Inspectors General of Prisons, as Inspectors of Lunatic Asylums, to report annually to the Lord Lieutenant, and to the Lord Chancellor, on the state and condition of the Private Asylums. Your Lordship has signified your approval that the Inspectors' report dealing with the state and condition of the several houses licensed under the Private Asylums Act, and the care of the patients therein, shall be accepted as a fulfilment of the requirements contained in the section. We have therefore the honour of addressing this portion of our report, together with Appendix C, and the latter part of Appendix F, to both your Excellency and your Lordship.

PRIVATE
ASYLUMS.

The number of houses set apart for the care of private patients in Ireland is eighteen. Of these fourteen are licensed under the Private Asylums Act, showing a reduction of two in the number of these houses as compared with last year. In one case (Esker House) only a single patient was resident, and therefore a licence was not required, and in the other (Lisle House) no application was made for a renewal.

The number of hospitals or charitable institutions provided for under the 49th section of the Act is four, viz :—

St. Patrick's (Swift's).

St. Vincent's.

Bloomfield.

Stewart Institution.

PRIVATE
ASYLUMS.

Although these latter institutions are not kept for profit by any private individual, we cannot but think that their usefulness would be much enhanced and their management rendered more satisfactory to the public were the provisions of the new English Lunacy Act, dealing with similar institutions in England, extended to them. Especially do these remarks apply to St. Patrick's Hospital (Swift's). We cannot but think that with such provisions, the usefulness of this institution might be much extended, and its resources utilised more in accordance with the wishes of its illustrious founder.

The number of patients resident in licensed houses, and institutions not kept for profit, amounted on the 1st January, 1893, to 644, and on the 1st January, 1894, to 642. The following are the changes which have taken place during the year amongst the inmates of these establishments:—

| | Males. | Females. | Total. |
|---|--------|----------|--------|
| Number resident on the 1st January, 1893, | 275 | 369 | 644 |
| Admitted, | 77 | 83 | 160 |
| Discharged, | 64 | 75 | 139 |
| Died, | 17 | 15 | 32 |
| Remaining on the 1st January, 1894, . | 281 | 361 | 642 |

Table (1), Appendix C., gives the number of patients in these institutions resident on the 31st December of each year from 1880, and the following Table shows the admissions, distinguishing first admissions from relapsed cases:—

| YEARS. | First Admission. | Not First Admission. | Total Admitted. |
|---------------|------------------|----------------------|-----------------|
| 1880. | 130 | 36 | 166 |
| 1881. | 121 | 23 | 145 |
| 1882. | 127 | 46 | 173 |
| 1883. | 103 | 32 | 135 |
| 1884. | 126 | 30 | 156 |
| 1885. | 136 | 36 | 172 |
| 1886. | 101 | 40 | 141 |
| 1887. | 129 | 48 | 187 |
| 1888. | 108 | 38 | 146 |
| 1889. | 129 | 36 | 165 |
| 1890. | 118 | 29 | 147 |
| 1891. | 132 | 35 | 167 |
| 1892. | 115 | 45 | 160 |
| 1893. | 122 | 38 | 160 |

These statistics show that very little change has taken place in the population, or in the number seeking admission during the past decade. It might be supposed that, having regard to the very great increase which has taken place in the admissions to district asylums, a similar increase should have taken place amongst the applicants for admission to private establishments, if we were to conclude that there has been any real increase of insanity. As we have already pointed out, however, the statistics of private asylums do not embrace a sufficiently large number to enable any certain conclusion to be derived from this. Wealth in Ireland is so sparingly distributed that the number of the insane able to contribute largely for their treatment must bear a very small proportion to the total number.

The provision for the accommodation of the insane possessed of private means cannot be considered satisfactory in all cases. The rates of board which the majority of these patients are able to pay are so small that it is practically impossible to make adequate provision for their proper care and treatment, and at the same time to allow a reasonable profit. Private asylums, therefore, receiving patients at such very low rates cannot afford those comforts which are now considered necessary for the treatment of the insane. Practically there is little provision for the poorer middle classes except in the wards of district asylums, where the accommodation is insufficient even for the pauper insane.

We must again deplore the want of such establishments in Ireland as the hospitals of England, or the Royal Asylums in Scotland, where, by public charity and without profit to any individual, provision has been made for the treatment of the insane not belonging to the pauper class, whose friends can contribute but sparingly towards their maintenance.

With a few exceptions, we cannot as already stated express complete satisfaction with the condition of the establishments for private patients in Ireland. Every allowance must be made for the want of means to carry out extensive improvements owing to the low rates of board which are charged. Some of the owners have so little capital that it is almost impossible for them to improve the structure or the furniture of their establishments. In certain cases we have had to complain that, from want of sufficient staff, the patients do not enjoy as much open-air exercise as is desirable, and that in some few cases restraint is unnecessarily had recourse to.

Our reports on the various licensed houses inspected during the year will be found in Appendix F.

We have the honour to be

Your Excellency's and Your Lordship's

Obedient servants,

GEO. PLUNKETT O'FARRELL.

E. MAZIERE COURTENAY.

Inspectors of Lunatics.

TABLE I.—Showing the Number and Distribution of Lunatics under care in Ireland on the 31st December of each Year from 1880 to 1893.

| Years. | District Asylums. | | | Central Asylum, Dundrum. | | | Private Asylums.* | | | Workhouses† | | | Gaols. | | | Total‡ | | |
|--------|-------------------|-------|-------|--------------------------|----|-----|-------------------|-----|-----|-------------|-------|-------|--------|----|----|--------|-------|--------|
| | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| 1880, | - | 4,482 | 8,467 | 140 | 37 | 177 | 236 | 356 | 622 | 1,414 | 2,099 | 3,513 | 2 | 1 | 3 | 6,477 | 4,506 | 12,983 |
| 1881, | - | 4,209 | 8,278 | 144 | 29 | 173 | 263 | 397 | 625 | 1,389 | 2,160 | 3,540 | - | - | - | 4,222 | 6,704 | 13,326 |
| 1882, | - | 4,022 | 8,271 | 114 | 29 | 173 | 264 | 396 | 680 | 1,399 | 2,250 | 3,640 | - | - | - | 4,400 | 6,894 | 13,704 |
| 1883, | - | 4,100 | 8,342 | 129 | 23 | 173 | 247 | 389 | 636 | 1,428 | 2,306 | 3,734 | - | - | - | 7,010 | 6,571 | 13,581 |
| 1884, | - | 4,222 | 8,537 | 146 | 22 | 173 | 244 | 385 | 638 | 1,437 | 2,316 | 3,753 | 1 | - | 1 | 7,170 | 7,008 | 14,178 |
| 1885, | - | 4,402 | 8,573 | 144 | 29 | 173 | 242 | 389 | 632 | 1,428 | 2,138 | 3,566 | - | - | - | 7,257 | 7,080 | 14,337 |
| 1886, | - | 4,442 | 8,594 | 129 | 22 | 173 | 232 | 369 | 602 | 1,471 | 2,297 | 3,768 | 1 | - | 1 | 7,287 | 7,232 | 14,519 |
| 1887, | - | 4,734 | 8,763 | 140 | 29 | 169 | 229 | 316 | 625 | 1,601 | 2,332 | 3,933 | 1 | - | 1 | 7,638 | 7,422 | 15,147 |
| 1888, | - | 4,838 | 8,937 | 140 | 26 | 168 | 260 | 331 | 631 | 1,585 | 2,274 | 3,859 | - | - | - | 7,821 | 7,790 | 15,611 |
| 1889, | - | 4,937 | 8,942 | 146 | 26 | 176 | 269 | 373 | 621 | 1,600 | 2,423 | 4,023 | 1 | - | 1 | 8,043 | 7,912 | 15,955 |
| 1890, | - | 4,194 | 8,284 | 126 | 29 | 179 | 253 | 368 | 621 | 1,566 | 2,296 | 3,861 | 2 | - | 2 | 8,215 | 8,096 | 16,311 |
| 1891, | - | 4,269 | 8,274 | 124 | 19 | 142 | 265 | 394 | 622 | 1,656 | 2,504 | 4,160 | - | - | - | 8,406 | 8,232 | 16,638 |
| 1892, | - | 4,601 | 8,832 | 128 | 21 | 149 | 275 | 399 | 644 | 1,791 | 2,497 | 4,288 | - | - | - | 8,766 | 8,619 | 17,384 |
| 1893, | - | 4,818 | 8,618 | 120 | 20 | 138 | 281 | 361 | 642 | 1,713 | 2,426 | 4,139 | - | - | - | 8,947 | 8,829 | 17,776 |

* Excludes of a gradually diminishing number vide Table IV. on page 18) of "Government Patients" located in the St. Patrick's Institution.

† The numbers under this heading are exclusive of certain patients located (under sec. 9 of 21 & 22 Vic., c. 67) in Workhouses, but who belong to and are included in the population of the District Asylums.

TABLE II.—Cost of District Asylums on the Local Rates.

| ASYLUMS. | Counties comprised in Districts. | Amounts paid by Districts. | | | Estimated poundage of sums paid on the rateable property in District. |
|----------------|--|--|--|--------------|---|
| | | Towards Building Fund during 12 months ended 31st March, 1894. | Towards Maintenance for 12 months ended 31st December, 1893. | Total. | |
| | | £ s. d. | £ s. d. | £ s. d. | Pence. |
| Armagh, . . | Armagh, . . | 3,148 7 6 | 5,227 5 5 | 8,375 12 5 | 4'7 |
| Ballinasloe, . | { Galway Co. and Town, Roscommon, } | 2,567 12 10 | 12,050 0 0 | 14,617 12 10 | 4'8 |
| Belfast, . . | { Antrim, . . Belfast City, Carrickfergus Town, } | 1,402 13 6 | 7,323 0 4 | 8,725 13 10 | 1'5 |
| Carlow, . . | { Carlow, . . Kildare, . . } | — | 2,500 18 6 | 2,500 18 6 | 1'1 |
| Castlebar, . . | Mayo, | 1,286 19 6 | 3,024 3 6 | 5,301 3 0 | 3'9 |
| Cloamell, . . | Tipperary, . . | 1,396 13 8 | 10,624 0 11 | 12,020 14 7 | 4'2 |
| Cork, | Cork, Co. & City, | 3,726 0 0 | 15,446 14 2 | 17,142 14 2 | 3'3 |
| Downpatrick, . | Down, | 484 5 0 | 4,912 0 0 | 5,436 5 0 | 1'4 |
| Ennis, | Clare, | 481 8 2 | 4,950 9 0 | 5,431 17 2 | 4'1 |
| Enniscorthy, . | Wexford, . . . | 792 10 2 | 7,830 17 11 | 8,623 8 1 | 5'4 |
| Kilkenny, . . | Kilkenny, Co. and City, | 561 5 4 | 3,420 0 0 | 4,001 5 4 | 2'6 |
| Killarney, . . | Kerry, | 1,885 15 7 | 4,579 10 7 | 6,465 6 2 | 5'3 |
| Letterkenny, . | Donegal, . . . | 281 7 10 | 969 1 7 | 1,250 9 5 | 1'0 |
| Limerick, . . | Limerick, Co. and City, | 895 16 6 | 5,659 19 10 | 6,555 16 4 | 2'9 |
| Londonderry, . | Londonderry, Co. and City, . . | 2,611 13 0 | 6,717 9 4 | 9,329 2 4 | 5'6 |
| Maryborough, . | King's & Queen's, | 947 11 8 | 5,014 18 1 | 5,962 9 9 | 2'8 |
| Monaghan, . . | { Monaghan, . . Cavan, . . . } | 1,938 14 2 | 7,700 0 0 | 9,638 14 2 | 4'2 |
| Mullingar, . . | { Longford, . . Meath, . . . } | 2,969 11 7 | 11,743 17 9 | 14,713 9 4 | 3'4 |
| Omagh, . . . | { Fermanagh, . . Tyrone, . . . } | 183 15 11 | 3,966 0 0 | 4,149 15 11 | 1'4 |
| Richmond, . . | { Dublin Co. and City, Wicklow, . Louth, . . . } | 1,845 8 9 | 12,925 19 11 | 20,771 8 8 | 2'4 |
| Shigo, | { Drogheda Town, Leitrim, . . . } | — | 5,997 0 7 | 5,997 0 7 | 4'1 |
| Waterford, . . | { Shigo, Waterford, Co. and City, . . } | 647 12 8 | 4,404 13 4 | 5,052 6 0 | 3'8 |
| Total, | | 50,035 2 10 | 152,835 0 9 | 182,873 3 7 | 3'1 |

TABLE III.—Showing admissions to District and Private Asylums in each of the years from 1881 to 1893.

| YEARS. | DISTRICT ASYLUMS. | | | PRIVATE ASYLUMS. | | |
|---|-------------------|----------|--------|------------------|----------|--------|
| | Males. | Females. | Total. | Males. | Females. | Total. |
| 1881, . . . | 1,806 | 1,196 | 2,502 | 61 | 84 | 145 |
| 1882, . . . | 1,437 | 1,208 | 2,645 | 89 | 84 | 173 |
| 1883, . . . | 1,455 | 1,249 | 2,704 | 58 | 77 | 135 |
| 1884, . . . | 1,519 | 1,217 | 2,736 | 76 | 86 | 162 |
| 1885, . . . | 1,476 | 1,374 | 2,850 | 91 | 81 | 172 |
| 1886, . . . | 1,531 | 1,215 | 2,746 | 69 | 72 | 141 |
| 1887, . . . | 1,558 | 1,805 | 2,863 | 85 | 102 | 187 |
| 1888, . . . | 1,513 | 1,808 | 2,821 | 75 | 71 | 146 |
| 1889, . . . | 1,491 | 1,465 | 2,956 | 86 | 79 | 165 |
| 1890, . . . | 1,643 | 1,452 | 3,095 | 77 | 70 | 147 |
| AVERAGE NUMBER of admissions during the 10 YEARS from 1881-1890. | 1,493 | 1,299 | 2,792 | 77 | 80 | 157 |
| 1891, . . . | 1,658 | 1,352 | 3,010 | 92 | 75 | 167 |
| 1892, . . . | 1,738 | 1,443 | 3,181 | 81 | 79 | 160 |
| 1893, . . . | 1,735 | 1,472 | 3,207 | 77 | 83 | 160 |

TABLE IV.—Showing the number of "Government Patients" in the Stewart Institution on the 31st December of each year, from 1880 to 1893.

| YEARS. | Males. | Females. | Total. | YEARS. | Males. | Females. | Total. |
|-----------|--------|----------|--------|-----------|--------|----------|--------|
| 1880, . . | 4 | 16 | 20 | 1887, . . | 3 | 5 | 8 |
| 1881, . . | 4 | 14 | 18 | 1888, . . | 8 | 5 | 8 |
| 1882, . . | 4 | 12 | 16 | 1889, . . | 2 | 5 | 7 |
| 1883, . . | 8 | 9 | 12 | 1890, . . | 1 | 5 | 6 |
| 1884, . . | 8 | 9 | 12 | 1891, . . | 1 | 4 | 5 |
| 1885, . . | 3 | 6 | 9 | 1892, . . | 1 | 4 | 5 |
| 1886, . . | 3 | 6 | 9 | 1893, . . | 1 | 4 | 5 |

APPENDIX A.

DISTRICT ASYLUMS

| Year | 1900 | 1901 | 1902 | 1903 | 1904 | 1905 | 1906 | 1907 | 1908 | 1909 | 1910 | 1911 | 1912 | 1913 | 1914 | 1915 | 1916 | 1917 | 1918 | 1919 | 1920 | 1921 | 1922 | 1923 | 1924 | 1925 | 1926 | 1927 | 1928 | 1929 | 1930 | 1931 | 1932 | 1933 | 1934 | 1935 | 1936 | 1937 | 1938 | 1939 | 1940 | 1941 | 1942 | 1943 | 1944 | 1945 | 1946 | 1947 | 1948 | 1949 | 1950 | 1951 | 1952 | 1953 | 1954 | 1955 | 1956 | 1957 | 1958 | 1959 | 1960 | 1961 | 1962 | 1963 | 1964 | 1965 | 1966 | 1967 | 1968 | 1969 | 1970 | 1971 | 1972 | 1973 | 1974 | 1975 | 1976 | 1977 | 1978 | 1979 | 1980 | 1981 | 1982 | 1983 | 1984 | 1985 | 1986 | 1987 | 1988 | 1989 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996 | 1997 | 1998 | 1999 | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 | 2023 | 2024 | 2025 | 2026 | 2027 | 2028 | 2029 | 2030 | 2031 | 2032 | 2033 | 2034 | 2035 | 2036 | 2037 | 2038 | 2039 | 2040 | 2041 | 2042 | 2043 | 2044 | 2045 | 2046 | 2047 | 2048 | 2049 | 2050 | 2051 | 2052 | 2053 | 2054 | 2055 | 2056 | 2057 | 2058 | 2059 | 2060 | 2061 | 2062 | 2063 | 2064 | 2065 | 2066 | 2067 | 2068 | 2069 | 2070 | 2071 | 2072 | 2073 | 2074 | 2075 | 2076 | 2077 | 2078 | 2079 | 2080 | 2081 | 2082 | 2083 | 2084 | 2085 | 2086 | 2087 | 2088 | 2089 | 2090 | 2091 | 2092 | 2093 | 2094 | 2095 | 2096 | 2097 | 2098 | 2099 |
|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|
| 1900 | 1901 | 1902 | 1903 | 1904 | 1905 | 1906 | 1907 | 1908 | 1909 | 1910 | 1911 | 1912 | 1913 | 1914 | 1915 | 1916 | 1917 | 1918 | 1919 | 1920 | 1921 | 1922 | 1923 | 1924 | 1925 | 1926 | 1927 | 1928 | 1929 | 1930 | 1931 | 1932 | 1933 | 1934 | 1935 | 1936 | 1937 | 1938 | 1939 | 1940 | 1941 | 1942 | 1943 | 1944 | 1945 | 1946 | 1947 | 1948 | 1949 | 1950 | 1951 | 1952 | 1953 | 1954 | 1955 | 1956 | 1957 | 1958 | 1959 | 1960 | 1961 | 1962 | 1963 | 1964 | 1965 | 1966 | 1967 | 1968 | 1969 | 1970 | 1971 | 1972 | 1973 | 1974 | 1975 | 1976 | 1977 | 1978 | 1979 | 1980 | 1981 | 1982 | 1983 | 1984 | 1985 | 1986 | 1987 | 1988 | 1989 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996 | 1997 | 1998 | 1999 | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 | 2023 | 2024 | 2025 | 2026 | 2027 | 2028 | 2029 | 2030 | 2031 | 2032 | 2033 | 2034 | 2035 | 2036 | 2037 | 2038 | 2039 | 2040 | 2041 | 2042 | 2043 | 2044 | 2045 | 2046 | 2047 | 2048 | 2049 | 2050 | 2051 | 2052 | 2053 | 2054 | 2055 | 2056 | 2057 | 2058 | 2059 | 2060 | 2061 | 2062 | 2063 | 2064 | 2065 | 2066 | 2067 | 2068 | 2069 | 2070 | 2071 | 2072 | 2073 | 2074 | 2075 | 2076 | 2077 | 2078 | 2079 | 2080 | 2081 | 2082 | 2083 | 2084 | 2085 | 2086 | 2087 | 2088 | 2089 | 2090 | 2091 | 2092 | 2093 | 2094 | 2095 | 2096 | 2097 | 2098 | 2099 | |

TABLE II.—Showing for each District Asylum the Number of Patients remaining on 31st December, 1892, and also the Number remaining on 31st December, 1893, together with the Daily Average Number resident during the Year 1893.

| ASYLUM. | Counties comprised in present District. | Number of Patients remaining on 31st December, 1892. | | | NUMBER OF PATIENTS REMAINING ON 31st DECEMBER, 1893. | | | Daily Average Number resident during 1893. | | |
|--------------------|---|--|-------|--------|--|-------|--------|--|-------|--------|
| | | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| Armagh, . . . | Armagh, . . . | 177 | 184 | 361 | 161 | 207 | 368 | 174 | 192 | 366 |
| Ballinasloe, . . . | { Galway, Co. and Town. Roscommon, } | 472 | 319 | 791 | 483 | 319 | 802 | 475 | 323 | 798 |
| Belfast, . . . | { Antrim, . . . Belfast City, Garrickfergus Town, } | 408 | 383 | 691 | 421 | 385 | 706 | 417 | 388 | 705 |
| Carlow, . . . | { Carlow, . . . Kildare, . . . } | 161 | 158 | 319 | 161 | 190 | 351 | 178 | 160 | 338 |
| Castletar, . . . | Mayo, . . . | 242 | 163 | 407 | 260 | 173 | 433 | 255 | 167 | 422 |
| Clonmel, . . . | Tipperary, . . . | 515 | 304 | 621 | 525 | 311 | 636 | 531 | 316 | 647 |
| Cork, . . . | Cork, Co. and City. | 853 | 584 | 1,092 | 885 | 588 | 1,123 | 870 | 539 | 1,309 |
| Down, . . . | Down, . . . | 229 | 302 | 531 | 252 | 311 | 464 | 245 | 292 | 446 |
| Ennis, . . . | Clare, . . . | 265 | 180 | 355 | 266 | 164 | 370 | 266 | 158 | 364 |
| Enniscorthy, . . . | Wexford, . . . | 228 | 174 | 402 | 228 | 178 | 404 | 223 | 175 | 397 |
| Kilkenny, . . . | Kilkenny, Co. and City. | 173 | 153 | 326 | 170 | 163 | 345 | 178 | 160 | 336 |
| Killarney, . . . | Kerry, . . . | 268 | 172 | 440 | 276 | 182 | 458 | 265 | 179 | 444 |
| Letterkenny, . . . | Donegal, . . . | 272 | 136 | 408 | 284 | 145 | 421 | 277 | 142 | 419 |
| Limerick, . . . | Limerick, Co. and City. | 273 | 260 | 533 | 288 | 267 | 555 | 285 | 267 | 552 |
| Londonderry, . . . | Londonderry, Co. and City. | 221 | 206 | 427 | 221 | 206 | 426 | 218 | 207 | 425 |
| Maryborough, . . . | King's and Queen's, . . . | 197 | 206 | 402 | 219 | 195 | 411 | 211 | 204 | 415 |
| Monaghan, . . . | { Meath, . . . Cavan, . . . } | 390 | 272 | 662 | 390 | 275 | 664 | 353 | 270 | 623 |
| Mullingar, . . . | { Longford, . . . Meath, . . . Westmeath, } | 285 | 261 | 546 | 282 | 225 | 507 | 264 | 248 | 512 |
| Omagh, . . . | { Fermanagh, . . . Tyrone, . . . } | 252 | 260 | 512 | 228 | 202 | 430 | 224 | 200 | 424 |
| Richmond, . . . | { Dublin, Co. and City. Wicklow, . . . Louth, . . . Drogheda Town, } | 661 | 786 | 1,467 | 704 | 734 | 1,438 | 661 | 735 | 1,396 |
| Sligo, . . . | { Lestrim, . . . Sligo, . . . } | 240 | 179 | 419 | 245 | 194 | 439 | 244 | 191 | 435 |
| Waterford, . . . | Waterford, Co. and City. | 205 | 177 | 382 | 206 | 172 | 378 | 210 | 174 | 384 |
| Total, . . . | | 6,001 | 5,320 | 11,321 | 6,818 | 5,616 | 12,434 | 6,709 | 5,593 | 12,307 |

TABLE III.—Showing for each District Asylum the Number of
and also the Number remaining

| ASYLUMS. | ADMISSIONS. | | | | | | | | | DISCHARGES. | | | | | | | | |
|--------------------|-------------------|-------|-------|-----------------------|-----|-----|-----------------|-------|-------|-------------|-----|-------|-----------|-----|-----|---------------|----|-----|
| | First Admissions. | | | Not First Admissions. | | | Total Admitted. | | | Recovered. | | | Relieved. | | | Not Improved. | | |
| | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| Armagh, . . . | 36 | 31 | 67 | 5 | 2 | 7 | 41 | 33 | 74 | 16 | 19 | 35 | 4 | - | 4 | 2 | - | 2 |
| Ballinasloe, . . . | 78 | 49 | 127 | 22 | 5 | 27 | 100 | 54 | 154 | 43 | 27 | 70 | 12 | 1 | 13 | - | - | - |
| Belfast, . . . | 70 | 64 | 134 | 37 | 20 | 57 | 107 | 103 | 210 | 41 | 51 | 92 | 28 | 34 | 62 | 3 | 3 | 6 |
| Carlow, . . . | 28 | 21 | 49 | 4 | 5 | 9 | 32 | 26 | 58 | 21 | 13 | 34 | 3 | 8 | 11 | - | - | - |
| Castlebar, . . . | 67 | 46 | 113 | 8 | 6 | 14 | 75 | 50 | 125 | 36 | 23 | 59 | 3 | 2 | 5 | - | - | - |
| Clonmel, . . . | 35 | 42 | 77 | 12 | 17 | 29 | 44 | 58 | 112 | 17 | 26 | 43 | 10 | 4 | 14 | - | 1 | 1 |
| Cork, . . . | 119 | 90 | 209 | 27 | 24 | 51 | 146 | 114 | 260 | 46 | 42 | 88 | 14 | 7 | 21 | 7 | 8 | 15 |
| Down, . . . | 36 | 45 | 81 | 22 | 14 | 36 | 58 | 59 | 117 | 19 | 10 | 29 | 12 | 18 | 30 | - | 3 | 3 |
| Ennis, . . . | 34 | 28 | 62 | 18 | 12 | 30 | 52 | 47 | 99 | 19 | 13 | 32 | 10 | 5 | 15 | 8 | - | 8 |
| Enniscorthy, . . . | 37 | 28 | 65 | 12 | 8 | 20 | 50 | 36 | 86 | 28 | 19 | 47 | 3 | 6 | 9 | - | 1 | 1 |
| Kilkenny, . . . | 29 | 30 | 59 | 6 | 6 | 12 | 32 | 36 | 71 | 13 | 10 | 23 | 7 | 8 | 15 | 1 | - | 1 |
| Killarney, . . . | 56 | 50 | 106 | 12 | 12 | 24 | 68 | 62 | 130 | 22 | 25 | 47 | 7 | 11 | 18 | - | - | - |
| Letterkenny, . . . | 52 | 42 | 94 | 22 | 18 | 40 | 74 | 55 | 129 | 24 | 14 | 38 | 8 | 5 | 13 | 4 | 3 | 7 |
| Limerick, . . . | 64 | 50 | 114 | 9 | 7 | 16 | 73 | 57 | 130 | 33 | 18 | 51 | 5 | 5 | 10 | - | 1 | 1 |
| Londonderry, . . . | 45 | 40 | 85 | 12 | 11 | 23 | 58 | 51 | 109 | 22 | 17 | 39 | 7 | 9 | 16 | 4 | 1 | 5 |
| Maryborough, . . . | 44 | 33 | 77 | 30 | 12 | 42 | 74 | 50 | 124 | 22 | 16 | 38 | 13 | 18 | 31 | 3 | - | 3 |
| Monaghan, . . . | 76 | 52 | 128 | 16 | 19 | 35 | 92 | 71 | 163 | 24 | 29 | 53 | 10 | 2 | 12 | 9 | 7 | 16 |
| Mullingar, . . . | 62 | 47 | 109 | 18 | 14 | 32 | 80 | 61 | 141 | 33 | 39 | 72 | 10 | 8 | 18 | 2 | 1 | 3 |
| Omagh, . . . | 68 | 66 | 134 | 43 | 24 | 67 | 111 | 82 | 193 | 22 | 27 | 49 | 14 | 12 | 26 | 11 | 17 | 28 |
| Richmond, . . . | 178 | 120 | 298 | 62 | 38 | 100 | 241 | 198 | 439 | 59 | 74 | 133 | 60 | 37 | 97 | 10 | 9 | 19 |
| Sligo, . . . | 44 | 31 | 75 | 16 | 18 | 34 | 60 | 46 | 106 | 18 | 16 | 34 | 17 | 4 | 21 | 1 | 1 | 2 |
| Waterford, . . . | 42 | 30 | 72 | 12 | 12 | 24 | 54 | 42 | 96 | 32 | 22 | 54 | 2 | 2 | 4 | - | 1 | 1 |
| Total, . . . | 1,301 | 1,167 | 2,468 | 424 | 315 | 739 | 1,735 | 1,472 | 3,207 | 678 | 541 | 1,219 | 269 | 206 | 475 | 63 | 57 | 120 |

Admissions, Discharges, Deaths, and Escapes during the Year 1893,
at the close thereof.

| | | | DEATHS. | | | | | | | | | | | | Escapes. | | | Number of Patients remaining on 31st Dec., 1893. | | | ASYLUMS. |
|-------------------|-----|-------|-----------|-----|-------|--------------|----|----|-------------|----|----|---------------|-----|-------|----------|----|----|--|-------|--------|---------------|
| Total Discharged. | | | Ordinary. | | | By Accident. | | | By Suicide. | | | Total Deaths. | | | | | | | | | |
| M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | |
| 22 | 19 | 41 | 14 | 11 | 25 | - | - | - | - | - | - | 14 | 11 | 25 | 1 | - | 1 | 181 | 207 | 388 | Armagh. |
| 43 | 28 | 71 | 23 | 26 | 49 | - | - | - | 1 | - | 1 | 24 | 26 | 50 | - | - | - | 483 | 219 | 702 | Ballinascloe. |
| 63 | 63 | 126 | 20 | 12 | 32 | 1 | - | 1 | 1 | - | 1 | 32 | 13 | 45 | - | - | - | 421 | 235 | 706 | Belfast. |
| 24 | 21 | 45 | 8 | 12 | 20 | - | - | - | - | - | - | 8 | 12 | 20 | - | - | - | 181 | 180 | 361 | Carlow. |
| 35 | 26 | 61 | 18 | 18 | 36 | - | - | - | - | - | - | 18 | 18 | 36 | - | - | - | 200 | 172 | 422 | Castlebar. |
| 27 | 21 | 48 | 17 | 22 | 40 | - | - | - | - | - | - | 17 | 22 | 40 | - | - | - | 325 | 311 | 336 | Clonmel. |
| 67 | 67 | 134 | 50 | 42 | 102 | 1 | - | 1 | 1 | - | 1 | 52 | 52 | 104 | - | - | - | 583 | 528 | 1,123 | Cork. |
| 25 | 31 | 56 | 21 | 19 | 40 | 1 | - | 1 | - | - | - | 22 | 19 | 41 | - | - | - | 253 | 211 | 464 | Down. |
| 37 | 24 | 61 | 13 | 9 | 22 | - | - | - | 1 | - | 1 | 14 | 9 | 23 | - | - | - | 100 | 104 | 270 | Ennis. |
| 31 | 26 | 57 | 17 | 8 | 25 | - | - | - | - | - | - | 17 | 8 | 25 | - | - | - | 226 | 176 | 404 | Enniscorthy. |
| 21 | 18 | 39 | 8 | 8 | 16 | - | - | - | - | - | - | 8 | 8 | 16 | - | - | - | 179 | 163 | 342 | Kilkenny. |
| 36 | 26 | 62 | 20 | 16 | 36 | - | - | - | - | - | - | 20 | 16 | 36 | - | - | - | 276 | 182 | 458 | Killarney. |
| 36 | 22 | 58 | 24 | 24 | 48 | - | - | - | - | - | - | 24 | 24 | 48 | - | - | - | 256 | 145 | 431 | Lisferkenny. |
| 38 | 24 | 62 | 20 | 20 | 40 | - | - | - | - | - | - | 20 | 20 | 40 | - | - | - | 288 | 267 | 555 | Limerick. |
| 34 | 27 | 61 | 23 | 28 | 51 | - | - | - | - | - | - | 23 | 28 | 51 | - | - | - | 222 | 302 | 424 | Londonderry. |
| 15 | 28 | 43 | 14 | 24 | 38 | - | 1 | 1 | - | - | - | 14 | 25 | 39 | - | - | - | 219 | 162 | 411 | Maryborough. |
| 42 | 46 | 88 | 20 | 22 | 42 | - | - | - | - | - | - | 20 | 22 | 42 | - | - | - | 210 | 278 | 488 | Monaghan. |
| 30 | 43 | 73 | 27 | 29 | 56 | - | - | - | - | - | - | 27 | 29 | 56 | 5 | - | 5 | 242 | 222 | 438 | Mullingar. |
| 77 | 57 | 134 | 28 | 22 | 50 | - | - | - | - | - | - | 28 | 22 | 50 | - | - | - | 218 | 262 | 560 | Omagh. |
| 159 | 120 | 279 | 56 | 120 | 176 | 1 | - | 1 | - | - | - | 57 | 120 | 187 | 2 | - | 2 | 704 | 764 | 1,458 | Richmond. |
| 26 | 20 | 46 | 16 | 11 | 27 | - | - | - | - | - | - | 16 | 11 | 27 | 2 | - | 2 | 245 | 194 | 459 | Sligo. |
| 24 | 22 | 46 | 20 | 15 | 35 | - | - | - | - | - | - | 20 | 15 | 35 | - | - | - | 206 | 172 | 378 | Waterford. |
| 692 | 637 | 1,319 | 507 | 560 | 1,067 | 4 | 1 | 5 | 4 | - | 4 | 515 | 561 | 1,076 | 11 | - | 11 | 6,318 | 5,416 | 12,434 | Total |

TABLE IV.—Showing for each Asylum the Number of CASES admitted, recovered, and under treatment during the Year 1893, as compared with the Number of PERSONS admitted, recovered, and under treatment.

| ASYLUMS. | ADMISSIONS. | | | | | | RECOVERIES. | | | | | | UNDER TREATMENT. | | | | | |
|-------------------|-------------|------|------|----------|------|------|-------------|-----|-------|----------|-----|-------|------------------|-------|--------|----------|-------|--------|
| | CASES. | | | PERSONS. | | | CASES. | | | PERSONS. | | | CASES. | | | PERSONS. | | |
| | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| Armagh, . . . | 41 | 32 | 73 | 40 | 32 | 72 | 16 | 19 | 35 | 15 | 18 | 33 | 216 | 237 | 453 | 217 | 236 | 453 |
| Ballinascloe, . . | 100 | 54 | 154 | 96 | 54 | 150 | 42 | 37 | 79 | 42 | 37 | 79 | 672 | 273 | 945 | 668 | 273 | 941 |
| Belfast, . . . | 107 | 108 | 215 | 108 | 100 | 208 | 41 | 31 | 72 | 38 | 27 | 65 | 318 | 386 | 704 | 310 | 363 | 673 |
| Carlow, . . . | 32 | 25 | 57 | 30 | 24 | 54 | 21 | 12 | 33 | 21 | 12 | 33 | 312 | 164 | 476 | 211 | 182 | 393 |
| Castlebar, . . . | 75 | 39 | 114 | 71 | 39 | 110 | 36 | 23 | 59 | 34 | 22 | 56 | 317 | 216 | 533 | 312 | 215 | 527 |
| Clonmel, . . . | 54 | 39 | 93 | 52 | 37 | 89 | 17 | 26 | 43 | 16 | 26 | 42 | 369 | 313 | 682 | 367 | 363 | 730 |
| Cork, . . . | 146 | 114 | 260 | 140 | 113 | 253 | 66 | 62 | 128 | 64 | 62 | 126 | 704 | 648 | 1,352 | 694 | 647 | 1,341 |
| Down, . . . | 56 | 39 | 95 | 55 | 37 | 92 | 10 | 10 | 20 | 10 | 9 | 19 | 297 | 261 | 558 | 289 | 258 | 547 |
| Ennis, . . . | 32 | 27 | 59 | 31 | 27 | 58 | 19 | 19 | 38 | 19 | 19 | 38 | 357 | 197 | 554 | 350 | 197 | 547 |
| Enniscorthy, . . | 20 | 26 | 46 | 19 | 24 | 43 | 26 | 19 | 45 | 26 | 19 | 45 | 275 | 210 | 485 | 273 | 208 | 481 |
| Kilkenny, . . . | 25 | 26 | 51 | 25 | 26 | 51 | 12 | 10 | 22 | 12 | 10 | 22 | 208 | 186 | 394 | 206 | 186 | 392 |
| Killarney, . . . | 66 | 62 | 128 | 66 | 61 | 127 | 33 | 28 | 61 | 32 | 27 | 59 | 326 | 324 | 650 | 324 | 323 | 647 |
| Letterkenny, . . | 74 | 53 | 127 | 69 | 52 | 121 | 34 | 24 | 58 | 34 | 24 | 58 | 346 | 191 | 537 | 341 | 188 | 529 |
| Limerick, . . . | 73 | 57 | 130 | 72 | 57 | 129 | 32 | 28 | 60 | 32 | 28 | 60 | 346 | 317 | 663 | 346 | 316 | 662 |
| Londonderry, . . | 26 | 21 | 47 | 25 | 21 | 46 | 22 | 17 | 39 | 22 | 17 | 39 | 276 | 237 | 513 | 274 | 237 | 511 |
| Maryborough, . . | 74 | 50 | 124 | 66 | 47 | 113 | 22 | 18 | 40 | 22 | 18 | 40 | 271 | 258 | 529 | 263 | 263 | 526 |
| Monaghan, . . . | 32 | 21 | 53 | 30 | 21 | 51 | 34 | 22 | 56 | 34 | 22 | 56 | 342 | 342 | 684 | 337 | 338 | 675 |
| Mullingar, . . . | 20 | 21 | 41 | 20 | 21 | 41 | 38 | 39 | 77 | 38 | 39 | 77 | 418 | 312 | 730 | 413 | 312 | 725 |
| Omagh, . . . | 111 | 82 | 193 | 108 | 80 | 188 | 52 | 37 | 89 | 52 | 37 | 89 | 432 | 342 | 774 | 421 | 337 | 758 |
| Rohmond, . . . | 241 | 288 | 529 | 232 | 239 | 471 | 82 | 74 | 156 | 82 | 71 | 153 | 922 | 1,044 | 1,966 | 903 | 1,025 | 1,928 |
| Sligo, . . . | 60 | 46 | 106 | 56 | 46 | 102 | 18 | 18 | 36 | 18 | 18 | 36 | 303 | 228 | 531 | 290 | 228 | 518 |
| Waterford, . . . | 54 | 42 | 96 | 52 | 42 | 94 | 22 | 22 | 44 | 21 | 21 | 42 | 280 | 218 | 498 | 258 | 218 | 476 |
| Total, . . . | 1725 | 1472 | 3197 | 1658 | 1436 | 3094 | 673 | 561 | 1,234 | 667 | 549 | 1,216 | 6,328 | 7,004 | 13,332 | 6,328 | 6,953 | 13,281 |

TABLE V.—Showing the Duration of the Disease on Admission in the Admissions, Discharges, and Deaths, during the Year 1863.

| CLASS. | DURATION OF DISEASE ON ADMISSION IN FIVE CLASSES. | | | | | | | | | | | |
|--|---|-------|-------|-----------------|-----|-------|--|-----|-----|-------------|-----|-------|
| | The Admissions. | | | The Discharges. | | | | | | The Deaths. | | |
| | | | | Recovered. | | | Recovered, Relieved, or Otherwise (including Escapes). | | | | | |
| | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| FIRST CLASS :— First Attack, and within Three Months on Admission, | 728 | 662 | 1,420 | 290 | 276 | 572 | 126 | 115 | 251 | 103 | 196 | 291 |
| SECOND CLASS :— First Attack, above Three, and within Twelve Months on Admission, | 213 | 209 | 425 | 112 | 87 | 199 | 43 | 41 | 89 | 85 | 106 | 193 |
| THIRD CLASS :— Not First Attack, and within Twelve Months on Admission, | 321 | 247 | 543 | 145 | 112 | 257 | 37 | 21 | 106 | 43 | 48 | 93 |
| FOURTH CLASS :— First Attack or not, but of more than Twelve Months on Admission, | 210 | 229 | 469 | 82 | 61 | 143 | 43 | 29 | 88 | 137 | 129 | 296 |
| FIFTH CLASS :— Completed, | 20 | 12 | 61 | 2 | 1 | 3 | 12 | 2 | 12 | 15 | 8 | 23 |
| UNKNOWN AND INSANITY DOUBTFUL, | 192 | 77 | 279 | 41 | 24 | 65 | 23 | 17 | 40 | 43 | 40 | 89 |
| Total, | 1,716 | 1,672 | 3,507 | 673 | 661 | 1,280 | 325 | 266 | 591 | 513 | 541 | 1,076 |

TABLE VI.—Showing length of Residence in District Asylums of the Patients who were discharged Recovered during the Year 1893, and also of those who Died.

| LENGTH OF RESIDENCE. | RECOVERED. | | | DIED. | | |
|-------------------------------|------------|---------|--------|-------|---------|--------|
| | Male. | Female. | Total. | Male. | Female. | Total. |
| Under 1 month, | 24 | 16 | 40 | 37 | 28 | 74 |
| From 1 to 3 months, | 168 | 115 | 283 | 48 | 30 | 78 |
| " 3 " 6 " | 218 | 162 | 380 | 24 | 26 | 50 |
| " 6 " 9 " | 93 | 100 | 193 | 26 | 21 | 47 |
| " 9 " 12 " | 83 | 67 | 150 | 29 | 32 | 61 |
| " 1 " 2 years, | 72 | 55 | 127 | 60 | 66 | 126 |
| " 2 " 3 " | 20 | 16 | 36 | 60 | 54 | 114 |
| " 3 " 5 " | 12 | 9 | 21 | 51 | 91 | 142 |
| " 5 " 7 " | 6 | 3 | 9 | 21 | 44 | 75 |
| " 7 " 10 " | 3 | 1 | 4 | 36 | 53 | 89 |
| " 10 " 12 " | 1 | 2 | 3 | 12 | 12 | 24 |
| " 12 " 15 " | 2 | 2 | 4 | 20 | 19 | 39 |
| " 15 " 20 " | — | 2 | 2 | 24 | 21 | 45 |
| " 20 " 25 " | — | — | — | 18 | 16 | 34 |
| " 25 " 30 " | 1 | 1 | 2 | 13 | 10 | 23 |
| " 30 " 35 " | — | — | — | 7 | 4 | 11 |
| " 35 " 40 " | — | 1 | 1 | 2 | 6 | 8 |
| Upwards of 40 " | — | — | — | 4 | 2 | 6 |
| Total, | 678 | 561 | 1,239 | 515 | 561 | 1,076 |

TABLE VII.—Showing for each District Asylum the Percentage of Recoveries on the Admissions, and also the Percentage of Deaths on the Daily Average Number Resident during the Year 1893.

| ASYLUM. | Percentage of Recoveries on Admissions. | | | Percentage of Deaths on Daily Average Number Resident. | | |
|------------------------|---|------|------|--|------|------|
| | M. | F. | T. | M. | F. | T. |
| Armagh, | 26.0 | 25.8 | 27.2 | 8.0 | 6.7 | 6.8 |
| Ballinasloe, | 42.0 | 60.0 | 48.4 | 7.1 | 8.0 | 7.6 |
| Belfast, | 38.2 | 49.5 | 43.8 | 7.6 | 4.5 | 6.4 |
| Carlow, | 68.6 | 60.0 | 58.8 | 4.4 | 8.0 | 6.4 |
| Castibabar, | 48.0 | 46.0 | 47.2 | 7.0 | 10.7 | 8.6 |
| Clonmel, | 31.4 | 44.0 | 38.0 | 6.2 | 7.4 | 6.8 |
| Cork, | 21.5 | 26.8 | 22.8 | 9.1 | 9.5 | 9.4 |
| Down, | 17.2 | 16.9 | 17.0 | 9.0 | 9.4 | 9.2 |
| Dunla, | 36.6 | 40.4 | 38.4 | 6.8 | 5.7 | 6.3 |
| Enniscorthy, | 68.0 | 81.7 | 66.6 | 7.0 | 4.5 | 6.2 |
| Kilkenny, | 37.1 | 27.8 | 32.4 | 4.5 | 6.0 | 4.7 |
| Kilharney, | 33.8 | 40.3 | 36.9 | 7.3 | 8.3 | 6.1 |
| Lettickenny, | 32.4 | 25.4 | 28.4 | 8.6 | 18.8 | 11.4 |
| Limerick, | 45.2 | 31.6 | 38.2 | 7.0 | 9.7 | 8.3 |
| Londonderry, | 20.6 | 33.8 | 26.8 | 10.3 | 11.6 | 11.9 |
| Maryborough, | 29.7 | 20.0 | 24.8 | 6.6 | 17.1 | 11.8 |
| Meonaghan, | 26.9 | 40.8 | 38.4 | 8.5 | 8.8 | 8.6 |
| Mullingar, | 47.6 | 63.9 | 54.0 | 6.8 | 11.6 | 8.7 |
| Omagh, | 44.8 | 32.9 | 40.9 | 8.5 | 8.8 | 8.7 |
| Richmond, | 36.9 | 28.6 | 32.6 | 8.2 | 16.3 | 12.6 |
| Sligo, | 20.0 | 22.6 | 21.1 | 6.3 | 6.7 | 6.2 |
| Waterford, | 69.2 | 60.0 | 63.6 | 9.6 | 8.5 | 9.1 |
| Total, | 39.0 | 28.1 | 28.6 | 7.6 | 10.0 | 8.7 |

TABLE VIII.—Showing the Authority for the Admission into
during the year ended

| ASYLUMS. | ORDINARY CASES | | | | | | | | | | | | Admitted by Order of the Lord Chancellor. | | |
|-------------------------|-----------------------------|----|----|---------------------------------------|-----|-----|---|----|----|---|----|----|---|----|----|
| | Admitted by Order of Board. | | | Admitted as urgent by the Physicians. | | | Patients contributing to maintenance and admitted under Privy Council Rule upon transmission of the Form to the Inspectors. | | | Soldiers contributing to maintenance and admitted under Privy Council Rule of 28th April, 1853. | | | | | |
| | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| Armagh, | . | . | . | 14 | 24 | 38 | 1 | . | 1 | . | . | . | 1 | . | 1 |
| Ballinasloe, | . | . | . | 10 | 7 | 17 | 1 | . | 1 | . | . | . | . | . | . |
| Belfast, | 2 | 3 | 5 | 33 | 61 | 99 | 6 | 3 | 9 | 5 | . | 6 | . | . | . |
| Carlow, | . | . | . | 2 | 13 | 15 | . | . | . | . | . | . | . | . | . |
| Castlebar, | . | . | . | 10 | 13 | 23 | . | . | . | . | . | . | . | . | . |
| Clonmel, | . | . | . | 17 | 21 | 38 | . | 1 | 1 | . | . | . | . | . | . |
| Cork, | 2 | 1 | 3 | 19 | 42 | 62 | . | . | . | 3 | . | 2 | . | . | . |
| Down, | 1 | 1 | 2 | 19 | 29 | 48 | . | . | . | . | . | . | . | . | . |
| Ennis, | . | . | . | 10 | 11 | 21 | . | . | . | . | . | . | . | . | . |
| Enniscoorthy, | . | . | . | 18 | 20 | 38 | . | . | . | . | . | . | . | . | . |
| Kilkenny, | 1 | 6 | 6 | . | 2 | 2 | . | . | . | . | . | . | . | . | . |
| Kilmarney, | 3 | 9 | 12 | . | . | . | . | . | . | . | . | . | . | . | . |
| Letterkenny, | . | . | . | 6 | 6 | 11 | . | . | . | . | . | . | . | . | . |
| Limerick, | . | . | . | 12 | 24 | 36 | . | . | . | . | . | . | . | . | . |
| Londonderry, | 1 | 2 | 3 | 14 | 21 | 35 | . | . | . | . | . | . | . | . | . |
| Maryborough, | 1 | 2 | 3 | 28 | 27 | 55 | 2 | . | 2 | . | . | . | . | . | . |
| Monaghan, | 1 | . | 2 | 1 | . | 1 | . | . | . | . | . | . | . | . | . |
| Mullingar, | . | . | . | 7 | 10 | 17 | . | . | . | . | . | . | . | . | . |
| Omagh, | . | . | . | 3 | 11 | 14 | . | . | . | . | . | . | . | . | . |
| Richmond, | 5 | 5 | 10 | 25 | 33 | 58 | . | . | . | 8 | . | 3 | . | . | . |
| Sligo, | . | . | . | 1 | 2 | 3 | . | . | . | . | . | . | . | . | . |
| Waterford, | . | . | . | 25 | 35 | 60 | . | . | . | . | . | . | . | . | . |
| Total, | 17 | 29 | 46 | 281 | 416 | 697 | 10 | 4 | 14 | 16 | . | 16 | 1 | . | 1 |

each Asylum of Patients, and also the Number Admitted,
31st December, 1893.

| ADMITTED BY ORDER OF LORD LIEUTENANT. | | | | | | DANGEROUS LUNATICS. | | | | | | Total Admitted during Year. | | | ASYLUMS. |
|--|----|----|--|----|----|--|-----|-------|--|----|----|--------------------------------|-------|-------|--------------|
| From Central Asylum. | | | Lunatics charged with Offences, or detained in default of Surety to keep the Peace. | | | Committed by Justices under the Act 35 & 36 Vic., c. 118. | | | Admitted under the Army Act, 1881, sec. 97. | | | | | | |
| M. | P. | T. | M. | P. | T. | M. | P. | T. | M. | P. | T. | M. | P. | T. | |
| . | . | . | . | . | . | 28 | 29 | 54 | . | . | . | 41 | 53 | 94 | Armagh. |
| 2 | . | 2 | 2 | 2 | 4 | 85 | 45 | 130 | . | . | . | 100 | 54 | 154 | Ballinasloe. |
| . | . | . | 1 | 2 | 3 | 52 | 34 | 87 | 2 | . | 2 | 107 | 103 | 210 | Belfast. |
| . | . | . | 3 | 1 | 4 | 25 | 13 | 39 | . | . | . | 33 | 28 | 61 | Carlow. |
| . | . | . | 3 | 2 | 5 | 62 | 35 | 97 | . | . | . | 78 | 80 | 158 | Castlebar. |
| . | . | . | 2 | 1 | 3 | 35 | 36 | 71 | . | . | . | 54 | 59 | 113 | Clonmel. |
| 2 | . | 2 | 9 | 3 | 12 | 107 | 67 | 174 | 4 | . | 4 | 146 | 114 | 260 | Cork. |
| . | . | . | 1 | . | 1 | 37 | 39 | 66 | . | . | . | 58 | 58 | 117 | Down. |
| . | . | . | 3 | . | 3 | 39 | 35 | 74 | . | . | . | 52 | 47 | 99 | Dunelm. |
| . | . | . | 3 | . | 3 | 29 | 16 | 45 | . | . | . | 50 | 36 | 86 | Dundee. |
| 1 | . | 1 | 3 | . | 3 | 30 | 29 | 59 | . | . | . | 38 | 38 | 77 | Kilkenny. |
| . | 1 | 1 | . | . | . | 55 | 52 | 117 | . | . | . | 68 | 52 | 120 | Killarney. |
| . | . | . | 1 | . | 1 | 67 | 50 | 117 | . | . | . | 74 | 55 | 129 | Lettistown. |
| . | . | . | 8 | 1 | 9 | 53 | 33 | 86 | . | . | . | 73 | 57 | 130 | Limerick. |
| . | . | . | 2 | . | 2 | 41 | 38 | 79 | . | . | . | 58 | 51 | 109 | Londonderry. |
| . | . | . | . | . | . | 42 | 21 | 63 | 1 | . | 1 | 74 | 50 | 124 | Maryborough. |
| . | . | . | . | . | . | 90 | 70 | 160 | . | . | . | 92 | 71 | 163 | Monaghan. |
| . | . | . | 1 | 1 | 2 | 73 | 50 | 123 | . | . | . | 80 | 61 | 141 | Mullingar. |
| . | . | . | 2 | 2 | 4 | 108 | 59 | 177 | . | . | . | 111 | 82 | 193 | Omagh. |
| 1 | 1 | 2 | 6 | 8 | 14 | 155 | 105 | 260 | 2 | . | 2 | 243 | 198 | 441 | Richmond. |
| . | . | . | 1 | 1 | 2 | 56 | 42 | 98 | . | . | . | 59 | 46 | 105 | Sligo. |
| . | . | . | 1 | . | 1 | 27 | 7 | 34 | 1 | . | 1 | 54 | 42 | 96 | Waterford. |
| 5 | 2 | 8 | 48 | 24 | 72 | 1,240 | 697 | 1,937 | 10 | . | 10 | 1,735 | 1,472 | 3,207 | Total. |

TABLE IX.—Showing in Quinquennial Periods the Ages of the Patients who were Admitted, who Recovered, and who Died during the Year 1893; and also of those who were Remaining on the 31st December, 1893.

| Age. | Admissions. | | | Recoveries. | | | Deaths. | | | Remaining on 31st December, 1893. | | |
|---------------------|-------------|-------|-------|-------------|-----|-------|---------|-----|-------|-----------------------------------|-------|--------|
| | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| From 5 to 10 Years, | — | 1 | 1 | — | — | — | — | — | — | 2 | 1 | 2 |
| “ 10 “ 15 “ | 10 | 16 | 26 | 4 | 8 | 12 | 7 | 1 | 8 | 17 | 16 | 33 |
| “ 15 “ 20 “ | 114 | 111 | 225 | 52 | 47 | 99 | 12 | 10 | 22 | 178 | 149 | 327 |
| “ 20 “ 25 “ | 251 | 189 | 440 | 119 | 83 | 202 | 29 | 22 | 51 | 518 | 431 | 949 |
| “ 25 “ 30 “ | 275 | 184 | 459 | 86 | 77 | 163 | 37 | 44 | 81 | 763 | 522 | 1,285 |
| “ 30 “ 35 “ | 223 | 189 | 412 | 80 | 80 | 160 | 51 | 56 | 107 | 615 | 634 | 1,249 |
| “ 35 “ 40 “ | 174 | 142 | 316 | 82 | 63 | 145 | 38 | 52 | 90 | 853 | 658 | 1,511 |
| “ 40 “ 45 “ | 159 | 145 | 304 | 64 | 55 | 119 | 56 | 56 | 111 | 905 | 734 | 1,639 |
| “ 45 “ 50 “ | 117 | 124 | 241 | 44 | 40 | 84 | 58 | 56 | 114 | 749 | 692 | 1,441 |
| “ 50 “ 55 “ | 112 | 122 | 234 | 54 | 39 | 93 | 47 | 65 | 112 | 640 | 596 | 1,236 |
| “ 55 “ 60 “ | 101 | 67 | 168 | 37 | 38 | 75 | 47 | 45 | 92 | 429 | 407 | 836 |
| “ 60 “ 65 “ | 86 | 50 | 136 | 28 | 17 | 45 | 29 | 52 | 81 | 332 | 274 | 606 |
| “ 65 “ 70 “ | 24 | 29 | 53 | 8 | 9 | 17 | 20 | 26 | 46 | 171 | 187 | 358 |
| “ 70 “ 75 “ | 21 | 28 | 49 | 1 | 7 | 8 | 20 | 29 | 49 | 95 | 87 | 182 |
| “ 75 “ 80 “ | 12 | 9 | 21 | 1 | 1 | 2 | 16 | 10 | 26 | 50 | 36 | 86 |
| “ 80 “ 85 “ | 4 | 2 | 6 | 1 | — | 1 | 8 | 8 | 16 | 16 | 15 | 31 |
| “ 85 “ 90 “ | — | 2 | 2 | — | — | — | 5 | 3 | 8 | 41 | 20 | 61 |
| Unknown, | 38 | 20 | 58 | 17 | 8 | 25 | 1 | 3 | 4 | 132 | 109 | 241 |
| Total, | 1,778 | 1,472 | 3,250 | 678 | 661 | 1,339 | 516 | 561 | 1,077 | 6,018 | 6,616 | 12,634 |

TABLE X.—Showing the Educational Condition of Patients remaining in District Asylums on 31st December, 1893.

| Educational Condition. | Males. | Females. | Total. |
|------------------------------------|--------|----------|--------|
| Well Educated, | 559 | 647 | 1,206 |
| Can Read and Write well, | 1,448 | 1,135 | 2,583 |
| “ “ indifferently, | 2,210 | 1,433 | 3,643 |
| Can Read only, | 314 | 907 | 1,221 |
| Cannot Read or Write, | 1,297 | 1,094 | 2,391 |
| Unascertained, | 400 | 400 | 800 |
| Total, | 6,818 | 5,616 | 12,434 |

TABLE XI.—Showing the Social Condition as to Marriage of the Patients who were Admitted, who Recovered, and who Died during the Year 1893.

| — | Admissions. | | | Recoveries. | | | Deaths. | | |
|--------------------------|-------------|-------|-------|-------------|-----|-------|---------|-----|-------|
| | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| Married, | 560 | 495 | 995 | 214 | 185 | 407 | 185 | 176 | 361 |
| Single, | 1,096 | 815 | 1,913 | 425 | 312 | 737 | 286 | 218 | 504 |
| Widowed, | 70 | 115 | 185 | 25 | 41 | 64 | 23 | 55 | 78 |
| Unascertained, | 67 | 47 | 114 | 16 | 15 | 31 | 21 | 14 | 35 |
| Total | 1,735 | 1,472 | 3,207 | 678 | 561 | 1,239 | 515 | 561 | 1,076 |

TABLE XII.—Showing the Causes of Death

| AGES. | CEREBRAL AND SPINAL AFFECTIONS. | | | | | | | | | | THORACIC DISEASES. | | | | | | | | | |
|---------------------|---------------------------------|----|---------------------------|----|----------------------------------|----|--------------------------------------|----|-------------------|----|--------------------|----|--------------|-----|--------------------------------------|----|---------------------------|----|---------------------------------|----|
| | Apoplexy and Paralysis. | | Epilepsy and Convulsions. | | General Paralysis of the Insane. | | Exhaustion after Measles or Malaria. | | Organic Diseases. | | Tumours. | | Consumption. | | Inflammation of Lungs and Membranes. | | Other Pulmonary Diseases. | | Diseases of Heart and Arteries. | |
| | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. |
| From 5 to 10 years, | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| " 10 to 15 " | - | - | 3 | - | - | - | - | - | 1 | - | - | - | 2 | - | - | - | - | - | - | - |
| " 15 to 20 " | - | - | 3 | - | - | - | 2 | 2 | - | 1 | - | - | 4 | 4 | - | - | - | - | 1 | 1 |
| " 20 to 25 " | - | 1 | 7 | 2 | - | - | 2 | - | 6 | 2 | - | - | 12 | 20 | 2 | 2 | 1 | - | 2 | - |
| " 25 to 30 " | - | - | 5 | 1 | 2 | - | 2 | 1 | 2 | 2 | - | - | 23 | 25 | 1 | 3 | - | 1 | - | 1 |
| " 30 to 35 " | - | - | 5 | 2 | 3 | - | 3 | 4 | 4 | 4 | - | - | 22 | 37 | 7 | 1 | - | - | 2 | 1 |
| " 35 to 40 " | 1 | 1 | 3 | 4 | 2 | - | 2 | 2 | 2 | 4 | - | - | 8 | 29 | 1 | 1 | 2 | 1 | 4 | 4 |
| " 40 to 45 " | 5 | 2 | 2 | - | 8 | - | 4 | 3 | 5 | 2 | - | - | 10 | 22 | 11 | 3 | 3 | 1 | 3 | 5 |
| " 45 to 50 " | - | 2 | 1 | 3 | 7 | - | 9 | 3 | 7 | 1 | - | - | 17 | 16 | 6 | 7 | 3 | 2 | 2 | 2 |
| " 50 to 55 " | 3 | 2 | 1 | 1 | 3 | - | 6 | 8 | 5 | 3 | - | - | 6 | 15 | 3 | 6 | 4 | - | 1 | 9 |
| " 55 to 60 " | 4 | 3 | 4 | - | 2 | - | 3 | 2 | 3 | 6 | - | - | 6 | 9 | 5 | 6 | 1 | 5 | 1 | 2 |
| " 60 to 65 " | 1 | 4 | - | 1 | - | - | 3 | 2 | 5 | 2 | - | - | 1 | 6 | 2 | 5 | 1 | 2 | 7 | 3 |
| " 65 to 70 " | 2 | - | 2 | - | - | - | 2 | 5 | 2 | 3 | - | - | 3 | 2 | 4 | 5 | 1 | 1 | 4 | 5 |
| " 70 to 75 " | 1 | - | - | 1 | - | - | 2 | 1 | 1 | 2 | - | - | 1 | 3 | 3 | 4 | 2 | 1 | 4 | 4 |
| " 75 to 80 " | 1 | 2 | - | - | - | - | 1 | - | 1 | - | - | - | - | 1 | 1 | - | 2 | - | - | 1 |
| " 80 to 85 " | - | - | 1 | - | - | - | 1 | - | - | - | - | - | - | - | - | - | - | - | - | - |
| " 85 & upwards, | - | - | - | - | - | - | - | - | 1 | - | - | - | - | - | - | - | - | - | - | - |
| Unknown, . . . | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 1 | 2 | - | - | - | - |
| Total, . . . | 18 | 17 | 37 | 15 | 27 | - | 42 | 33 | 45 | 32 | - | - | 115 | 191 | 53 | 45 | 20 | 15 | 37 | 46 |

TABLE XIII.—Showing the probable Causes of Insanity in the Patients who were admitted during the Year 1893.

| CAUSES. | Males. | Females. | TOTAL. |
|--|--------|----------|--------|
| MORAL CAUSES:— | | | |
| Domestic trouble, | 59 | 81 | 149 |
| Adverse circumstances, | 47 | 19 | 66 |
| Mental anxiety and worry, | 59 | 40 | 99 |
| Religious excitement, | 27 | 33 | 60 |
| Love affairs, | 8 | 19 | 27 |
| Fright and nervous shock, | 19 | 39 | 58 |
| PHYSICAL CAUSES:— | | | |
| Intemperance in drink, | 233 | 76 | 314 |
| " sexual, | 4 | 1 | 5 |
| Veneral disease, | 8 | 3 | 11 |
| Self-abuse (sexual), | 25 | 1 | 26 |
| Over-exertion, | 7 | 8 | 15 |
| Sunstroke, | 26 | 5 | 31 |
| Accident or injury, | 53 | 3 | 56 |
| Pregnancy, | — | 7 | 7 |
| Parturition and the puerperal state, | — | 47 | 47 |
| Lactation, | — | 13 | 12 |
| Uterine and ovarian disorders, | — | 23 | 23 |
| Puberty, | 19 | 9 | 19 |
| Change of life, | 5 | 25 | 30 |
| Fevers, | 7 | 7 | 14 |
| Privation and starvation, | 13 | 9 | 22 |
| Old age, | 27 | 48 | 75 |
| Other bodily diseases or disorders, | 91 | 74 | 165 |
| Previous attacks, | 179 | 149 | 319 |
| Hereditary influences, | 555 | 395 | 950 |
| Congenital defect, | 41 | 36 | 77 |
| Other ascertained causes, | 39 | 25 | 64 |
| UNKNOWN, | 392 | 358 | 750 |
| NOT INSANE, OR INSANITY DOUBTFUL, | 34 | 19 | 53 |
| Total, | 1,738 | 1,472 | 3,210 |

TABLE XIV.—Showing the Forms of Mental Disease in the Patients who were Admitted, who Recovered, and who Died during the year 1893.

| FORMS OF MENTAL DISEASE. | | Admissions. | | | Recoveries. | | | Deaths. | | |
|--|--|-------------|-------|-------|-------------|-----|-------|---------|-----|-----|
| | | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| Congenital or Inherited Mental Deficiency, | with Epilepsy, | 8 | 11 | 19 | — | — | — | 12 | 5 | 17 |
| | without „ | 44 | 28 | 72 | 4 | — | 4 | 14 | 9 | 23 |
| Epilepsy acquired, . . . | | 63 | 42 | 105 | 9 | 2 | 11 | 28 | 23 | 51 |
| General Paralysis of the Insane, . | | 47 | 5 | 52 | — | — | — | 25 | 2 | 27 |
| Mania | Acute, . . . | 445 | 291 | 736 | 190 | 173 | 363 | 85 | 77 | 162 |
| | Chronic, . . . | 190 | 172 | 362 | 54 | 51 | 105 | 95 | 123 | 218 |
| | Recurrent, . . . | 246 | 203 | 449 | 136 | 97 | 233 | 21 | 41 | 62 |
| | <i>A Pute</i> , . . . | 125 | 80 | 205 | 88 | 28 | 116 | 12 | 6 | 18 |
| | Puerperal, . . . | — | 38 | 38 | — | 15 | 15 | — | 2 | 2 |
| | Senile, . . . | 23 | 31 | 54 | 2 | 2 | 4 | 10 | 25 | 35 |
| Melancholia | Acute, . . . | 273 | 294 | 567 | 110 | 128 | 238 | 44 | 63 | 107 |
| | Chronic, . . . | 94 | 61 | 155 | 17 | 16 | 33 | 24 | 62 | 86 |
| | Recurrent, . . . | 53 | 43 | 106 | 28 | 27 | 55 | 9 | 10 | 19 |
| | Puerperal, . . . | — | 8 | 8 | — | 2 | 2 | — | — | — |
| | Senile, . . . | 17 | 6 | 23 | 5 | 1 | 6 | 7 | 4 | 11 |
| Dementia | Primary, . . . | 33 | 42 | 75 | 13 | 11 | 24 | 7 | 6 | 13 |
| | Secondary, . . . | 43 | 17 | 60 | 2 | 1 | 3 | 58 | 63 | 121 |
| | Senile, . . . | 22 | 23 | 45 | 1 | 2 | 3 | 17 | 20 | 37 |
| | Organic (i.e., from Tumours, Coarses Brain Disease, &c.) | 2 | — | 2 | — | — | — | 16 | 4 | 20 |
| Not Insane or Insanity Doubtful, | | 2 | 2 | 4 | — | 1 | 1 | — | 1 | 1 |
| Total, . . . | | 1,725 | 1,472 | 3,197 | 678 | 561 | 1,239 | 315 | 361 | 676 |

TABLE XV.—Showing Return in accordance with the Act 31 & 32 District Lunatic Asylums in Ireland which have been Disallowed, Year 1892—together with the amount of any Disallowances, Reductions, Governors, and of any steps which have been taken at Law for the

| ASYLUM. | Date of Commencement of Audit. | Date of Conclusion of Audit. | Particulars of all Charges and Payments which have been Disallowed, Reduced, or Inserted by the Auditors. |
|-----------------|--------------------------------|------------------------------|---|
| Armagh, . . . | 15 May, 1893, | 17 May, 1893, | Nil, |
| Ballinasloe, . | 2 April, 1893, | 3 April, 1893, | Nil, |
| Belfast, . . . | 25 April, 1893, | 29 April, 1893, | Nil, |
| Carlow, . . . | 30 Oct., 1893, | 3 Nov., 1893, | Labour wages £7 16s. ; overpayments in attendants' wages £1 19s. 6d. |
| Castletar, . . | 5 July, 1893, | 6 July, 1893, | |
| Clongmel, . . . | 10 Jan., 1894, | 16 Jan., 1894, | Nil, |
| Cork, . . . | 10 July, 1893, | 22 July, 1893, | Nil, |
| Down, . . . | 1 May, 1893, | 4 May, 1893, | Nil, |
| Ennis, . . . | 24 April, 1893, | 25 April, 1893, | Nil, |
| Enniscorthy, . | 22 Feb., 1894, | 23 Feb., 1894, | Nil, |
| Kilbenny, . . . | 5 June, 1893, | 8 June, 1893, | Nil, |
| Killarney, . . | 2 Aug., 1893, | 7 Aug., 1893, | Nil, |
| Letterkenny, . | 14 June, 1893, | 17 June, 1893, | Nil, |
| Limerick, . . . | 3 June, 1893, | 9 June, 1893, | Nil, |
| Londonderry, . | 18 April, 1893, | 22 May, 1893, | Nil, |
| Maryborough, . | 19 April, 1893, | 25 April, 1893, | Nil, |
| Monaghan, . . | 10 April, 1893, | 13 April, 1893, | Nil, |
| Mullingar, . . | 27 Mar., 1893, | 1 April, 1893, | Nil, |
| Omagh, . . . | 14 April, 1893, | 17 April, 1893, | Nil, |
| Richmond, . . | 1 May, 1893, | 13 June, 1893, | Nil, |
| Sligo, . . . | 15 May, 1893, | 22 May, 1893, | Nil, |
| Waterford, . . | 12 June, 1893, | 15 June, 1893, | Nil, |

Vic., cap. 97, sec. 14, of all Charges and Payments in the Accounts of the Reduced, or Inserted by the Auditors when auditing the Accounts for the or Insertions which have been recovered and paid to the Credit of the recovery of any Sums Disallowed, Reduced, or Inserted by the Auditors.

| Amount of any disallowances which have been recovered and paid to the credit of the Government. | Steps taken for the recovery of Sums Disallowed, Reduced, or Inserted by the Auditors. | Names of the several Auditors. |
|---|--|--------------------------------|
| £ s. d. | | |
| — | — | Col. R. M. Studdert. |
| — | — | Col. James O'Hara. |
| — | — | Col. R. M. Studdert. |
| 9 16 5 | None necessary, . . . | C. Croker, esq. |
| — | — | Col. James O'Hara. |
| — | — | William Edward Ellis, esq. |
| — | — | John H. Calvert, esq. |
| — | — | Col. R. M. Studdert. |
| — | — | Col. James O'Hara. |
| — | — | James W. Drury, esq. |
| — | — | C. Croker, esq. |
| — | — | John H. Calvert, esq. |
| — | — | R. J. Newell, esq. |
| — | — | William Edward Ellis, esq. |
| — | — | C. Pelly, esq. |
| — | — | Captain William Gibson. |
| — | — | C. Pelly, esq. |
| — | — | Captain William Gibson. |
| — | — | C. Pelly, esq. |
| — | — | William M'Dermott, esq. |
| — | — | R. J. Newell, esq. |
| — | — | C. Croker, esq. |

TABLE XVI.—Showing the quantity of Land in connection with each District Asylum, and how it was utilized during the year ended the 31st December, 1893.

| ASYLUMS. | QUANTITY OF LAND CONNECTED WITH EACH ASYLUM. | | | | |
|--------------------|--|------------|-----------|-------------------------------------|----------------------------|
| | QUANTITY OF LAND UNDER GRASS AND CULTIVATED. | | | Buildings, Courts, Woods, &c. | Total Quantity of Land. |
| | By Spade. | By Plough. | In Grass. | | |
| | A. R. P. | A. R. P. | A. R. P. | A. R. P. | A. R. P. |
| Armagh, . . . | 8 2 0 | — | 9 2 8 | 14 2 0 | 32 2 8 |
| Ballinasloe, . . . | 13 3 0 | — | 12 0 0 | 17 1 0 | 45 0 0 |
| Belfast, . . . | 9 0 0 | 12 2 0 | 13 2 0 | 20 2 0 | 55 2 0 |
| Carlow, . . . | 2 0 0 | 14 0 0 | 8 0 0 | 2 1 24 | 26 1 24 |
| Castlebar, . . . | 17 0 0 | — | 13 0 0 | 6 0 0 | 38 0 0 |
| Clonmel, . . . | 4 0 0 | 10 0 0 | 11 0 0 | 14 1 38 | 39 1 38 |
| Cork, . . . | 20 0 0 | 15 0 0 | 26 0 0 | 39 0 0 | 100 0 0 |
| Down, . . . | 7 1 0 | 20 1 28 | 55 0 30 | 27 2 7 | 110 1 25 |
| Ennis, . . . | 5 3 9 | 12 0 23 | 27 2 6 | 12 0 23 | 57 2 21 |
| Enniscorthy, . . . | 2 1 0 | 22 2 0 | 8 0 0 | 15 2 0 | 48 1 0 |
| Kilkenny, . . . | 10 2 37 | — | 27 3 13 | 12 0 3 | 50 2 13 |
| Killarney, . . . | 3 2 0 | 10 0 0 | 4 2 0 | 12 0 0 | 30 0 0 |
| Letterkenny, . . . | 20 0 0 | 6 0 0 | — | 14 0 0 | 40 0 0 |
| Limerick, . . . | 18 0 36 | — | 1 2 19 | 15 1 22 | 35 0 57 |
| Londonderry, . . . | 13 0 0 | — | 7 0 0 | 5 0 0 | 25 0 0 |
| Maryborough, . . . | 4 0 28 | 17 3 0 | 14 1 0 | 7 1 34 | 43 2 22 |
| Monaghan, . . . | 10 2 0 | — | 11 2 0 | 28 0 0 | 50 0 0 |
| Mullingar, . . . | 11 0 0 | — | 20 2 0 | 14 0 0 | 45 2 0 |
| Omagh, . . . | 34 0 0 | — | 50 0 0 | 52 2 5 | 136 2 5 |
| Richmond, . . . | 9 0 0 | 16 0 0 | 14 1 2 | 15 0 0 | 54 1 2 |
| Sligo, . . . | 21 0 0 | 10 0 0 | 43 1 7 | 14 3 0 | 89 0 7 |
| Waterford, . . . | 3 0 0 | 7 0 0 | 9 0 0 | 11 0 0 | 30 0 0 |
| Total, . . . | 249 2 30 | 173 1 11 | 369 2 5 | 370 1 36 | 1,183 0 2 |

| TABLE 1. | | | | | | | | | |
|--|----------------|--------------------|---------------|----------------|--------------------|---------------|----------------|--------------------|---------------|
| RESULTS OF THE ANALYSIS OF THE DATA FOR THE YEAR 1900. | | | | | | | | | |
| No. of cases. | No. of deaths. | No. of recoveries. | No. of cures. | No. of deaths. | No. of recoveries. | No. of cures. | No. of deaths. | No. of recoveries. | No. of cures. |
| | | | | | | | | | |
| 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
| 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
| 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 |
| 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 |
| 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
| 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 |
| 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 |
| 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 |
| 12 | 12 | 12 | 12 | 12 | 12 | 12 | 12 | 12 | 12 |
| 13 | 13 | 13 | 13 | 13 | 13 | 13 | 13 | 13 | 13 |
| 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 |
| 15 | 15 | 15 | 15 | 15 | 15 | 15 | 15 | 15 | 15 |
| 16 | 16 | 16 | 16 | 16 | 16 | 16 | 16 | 16 | 16 |
| 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 | 17 |
| 18 | 18 | 18 | 18 | 18 | 18 | 18 | 18 | 18 | 18 |
| 19 | 19 | 19 | 19 | 19 | 19 | 19 | 19 | 19 | 19 |
| 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 |
| 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 |
| 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 22 |
| 23 | 23 | 23 | 23 | 23 | 23 | 23 | 23 | 23 | 23 |
| 24 | 24 | 24 | 24 | 24 | 24 | 24 | 24 | 24 | 24 |
| 25 | 25 | 25 | 25 | 25 | 25 | 25 | 25 | 25 | 25 |
| 26 | 26 | 26 | 26 | 26 | 26 | 26 | 26 | 26 | 26 |
| 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 |
| 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 | 28 |
| 29 | 29 | 29 | 29 | 29 | 29 | 29 | 29 | 29 | 29 |
| 30 | 30 | 30 | 30 | 30 | 30 | 30 | 30 | 30 | 30 |
| 31 | 31 | 31 | 31 | 31 | 31 | 31 | 31 | 31 | 31 |
| 32 | 32 | 32 | 32 | 32 | 32 | 32 | 32 | 32 | 32 |
| 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 |
| 34 | 34 | 34 | 34 | 34 | 34 | 34 | 34 | 34 | 34 |
| 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 |
| 36 | 36 | 36 | 36 | 36 | 36 | 36 | 36 | 36 | 36 |
| 37 | 37 | 37 | 37 | 37 | 37 | 37 | 37 | 37 | 37 |
| 38 | 38 | 38 | 38 | 38 | 38 | 38 | 38 | 38 | 38 |
| 39 | 39 | 39 | 39 | 39 | 39 | 39 | 39 | 39 | 39 |
| 40 | 40 | 40 | 40 | 40 | 40 | 40 | 40 | 40 | 40 |
| 41 | 41 | 41 | 41 | 41 | 41 | 41 | 41 | 41 | 41 |
| 42 | 42 | 42 | 42 | 42 | 42 | 42 | 42 | 42 | 42 |
| 43 | 43 | 43 | 43 | 43 | 43 | 43 | 43 | 43 | 43 |
| 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 |
| 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 | 45 |
| 46 | 46 | 46 | 46 | 46 | 46 | 46 | 46 | 46 | 46 |
| 47 | 47 | 47 | 47 | 47 | 47 | 47 | 47 | 47 | 47 |
| 48 | 48 | 48 | 48 | 48 | 48 | 48 | 48 | 48 | 48 |
| 49 | 49 | 49 | 49 | 49 | 49 | 49 | 49 | 49 | 49 |
| 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 | 50 |
| 51 | 51 | 51 | 51 | 51 | 51 | 51 | 51 | 51 | 51 |
| 52 | 52 | 52 | 52 | 52 | 52 | 52 | 52 | 52 | 52 |
| 53 | 53 | 53 | 53 | 53 | 53 | 53 | 53 | 53 | 53 |
| 54 | 54 | 54 | 54 | 54 | 54 | 54 | 54 | 54 | 54 |
| 55 | 55 | 55 | 55 | 55 | 55 | 55 | 55 | 55 | 55 |
| 56 | 56 | 56 | 56 | 56 | 56 | 56 | 56 | 56 | 56 |
| 57 | 57 | 57 | 57 | 57 | 57 | 57 | 57 | 57 | 57 |
| 58 | 58 | 58 | 58 | 58 | 58 | 58 | 58 | 58 | 58 |
| 59 | 59 | 59 | 59 | 59 | 59 | 59 | 59 | 59 | 59 |
| 60 | 60 | 60 | 60 | 60 | 60 | 60 | 60 | 60 | 60 |
| 61 | 61 | 61 | 61 | 61 | 61 | 61 | 61 | 61 | 61 |
| 62 | 62 | 62 | 62 | 62 | 62 | 62 | 62 | 62 | 62 |
| 63 | 63 | 63 | 63 | 63 | 63 | 63 | 63 | 63 | 63 |
| 64 | 64 | 64 | 64 | 64 | 64 | 64 | 64 | 64 | 64 |
| 65 | 65 | 65 | 65 | 65 | 65 | 65 | 65 | 65 | 65 |
| 66 | 66 | 66 | 66 | 66 | 66 | 66 | 66 | 66 | 66 |
| 67 | 67 | 67 | 67 | 67 | 67 | 67 | 67 | 67 | 67 |
| 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 |
| 69 | 69 | 69 | 69 | 69 | 69 | 69 | 69 | 69 | 69 |
| 70 | 70 | 70 | 70 | 70 | 70 | 70 | 70 | 70 | 70 |
| 71 | 71 | 71 | 71 | 71 | 71 | 71 | 71 | 71 | 71 |
| 72 | 72 | 72 | 72 | 72 | 72 | 72 | 72 | 72 | 72 |
| 73 | 73 | 73 | 73 | 73 | 73 | 73 | 73 | 73 | 73 |
| 74 | 74 | 74 | 74 | 74 | 74 | 74 | 74 | 74 | 74 |
| 75 | 75 | 75 | 75 | 75 | 75 | 75 | 75 | 75 | 75 |
| 76 | 76 | 76 | 76 | 76 | 76 | 76 | 76 | 76 | 76 |
| 77 | 77 | 77 | 77 | 77 | 77 | 77 | 77 | 77 | 77 |
| 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 |
| 79 | 79 | 79 | 79 | 79 | 79 | 79 | 79 | 79 | 79 |
| 80 | 80 | 80 | 80 | 80 | 80 | 80 | 80 | 80 | 80 |
| 81 | 81 | 81 | 81 | 81 | 81 | 81 | 81 | 81 | 81 |
| 82 | 82 | 82 | 82 | 82 | 82 | 82 | 82 | 82 | 82 |
| 83 | 83 | 83 | 83 | 83 | 83 | 83 | 83 | 83 | 83 |
| 84 | 84 | 84 | 84 | 84 | 84 | 84 | 84 | 84 | 84 |
| 85 | 85 | 85 | 85 | 85 | 85 | 85 | 85 | 85 | 85 |
| 86 | 86 | 86 | 86 | 86 | 86 | 86 | 86 | 86 | 86 |
| 87 | 87 | 87 | 87 | 87 | 87 | 87 | 87 | 87 | 87 |
| 88 | 88 | 88 | 88 | 88 | 88 | 88 | 88 | 88 | 88 |
| 89 | 89 | 89 | 89 | 89 | 89 | 89 | 89 | 89 | 89 |
| 90 | 90 | 90 | 90 | 90 | 90 | 90 | 90 | 90 | 90 |
| 91 | 91 | 91 | 91 | 91 | 91 | 91 | 91 | 91 | 91 |
| 92 | 92 | 92 | 92 | 92 | 92 | 92 | 92 | 92 | 92 |
| 93 | 93 | 93 | 93 | 93 | 93 | 93 | 93 | 93 | 93 |
| 94 | 94 | 94 | 94 | 94 | 94 | 94 | 94 | 94 | 94 |
| 95 | 95 | 95 | 95 | 95 | 95 | 95 | 95 | 95 | 95 |
| 96 | 96 | 96 | 96 | 96 | 96 | 96 | 96 | 96 | 96 |
| 97 | 97 | 97 | 97 | 97 | 97 | 97 | 97 | 97 | 97 |
| 98 | 98 | 98 | 98 | 98 | 98 | 98 | 98 | 98 | 98 |
| 99 | 99 | 99 | 99 | 99 | 99 | 99 | 99 | 99 | 99 |
| 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 |

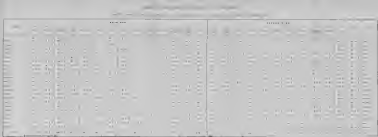


TABLE XXI.—Giving the Names of the Resident Medical Superintendents of District Asylums.

| Asylums. | Counties, &c., comprised in Districts. | Resident Medical Superintendents. |
|---------------------|--|---|
| Armagh, . . . | Armagh, | William Graham, M.D. |
| Ballinasloe, . . . | Galway, County and Town, and Roscommon. | R. V. Fletcher, F.R.C.S.I. & L.R.C.P.I. |
| Belfast, . . . | Antrim, Belfast City and Town of Carrickfergus. | Alexander Stewart Merrick, M.D. |
| Carlow, . . . | Carlow and Kildare, . . . | Thomas P. O'Meara, M.B. |
| Castlebar, . . . | Mayo, | George W. Hatchell, L.R.C.P. & S.I. |
| Clonmel, . . . | Tipperary, | W. Hastings Garner, F.R.C.S.I. & L.R.C.P.E. |
| Cork, . . . | Cork, County and City, . . . | Oscar T. Woods, M.D. & L.R.C.S.I. |
| Down, . . . | Down, | M. J. Nolan, L.R.C.P.I. & L.R.C.S.I. |
| Ennis, . . . | Clare, | R. P. Gibson, L.R.C.P. & S.I. |
| Enniscorthy, . . . | Wexford, | Thomas Drapes, M.B. & L.R.C.S.I. |
| Kilkenny, . . . | Kilkenny, Co. and City, . . . | W. Z. Myles, L.F.P. & S. & L.A.B. |
| Killarney, . . . | Kerry, | L. T. Griffin, L.R.C.S.I. & L.R.C.P.I. |
| Lisferkenney, . . . | Donegal, | R. E. Moore, M.D., B.Ch. |
| Limerick, . . . | Limerick, County and City, . . . | Edward D. O'Neill, L.R.C.S.I. & M.R.C.P.I. |
| Londonderry, . . . | Londonderry, Co. and City, . . . | C. E. Hetherington, M.B., M.Ch. |
| Maryborough, . . . | King's and Queen's, . . . | Joseph H. Hatchell, F.R.C.P.I. & L.R.C.S.I. |
| Monaghan, . . . | Cavan and Monaghan, . . . | Edward Taylor, L.R.C.S.I. & L.R.C.P.I. |
| Mullingar, . . . | Longford, Meath, and Westmeath. | Arthur Finegan, L.R.C.P. & S.I. |
| Omagh, . . . | Fermanagh and Tyrone, . . . | George E. Carr, M.B. & L.R.C.S.I. |
| Richmond, . . . | Dublin, County and City; Louth and Drogheda Town, and Wicklow, . . . | Conolly Norman, F.R.C.P.I. & ex-F.R.C.S.I. |
| Sligo, . . . | Leitrim and Sligo, . . . | Joseph Pettit, L.R.C.S.I. & L.R.C.P.I. |
| Waterford, . . . | Waterford, County and City. | Ringrose Atkins, M.D., M.Ch. |

APPENDIX B.

CENTRAL CRIMINAL LUNATIC ASYLUM
(DUNDRUM).

TABLE I.—Showing the Original and Present Accommodation for Criminal Lunatics at the Central Asylum, Dundrum.

| | | | | | |
|---------------------------|--------------------|-----------------------------------|-------|-------|--------|
| Year opened, | 1850 | Original Accommodation, . | M. 80 | F. 40 | T. 120 |
| Years enlarged, | 1864, 1884, & 1887 | Present Accommodation, . | 128 | 35 | 163 |
| | | (Calculated at 600 feet per bed.) | | | |

| | | | |
|--|-----|----|-----|
| | M. | F. | T. |
| Actual Number of Inmates on 31st December, 1893, . | 130 | 26 | 156 |

TABLE II.—Showing the Admissions, Discharges, and Deaths, &c., during the Year 1893.

| — | | | | | Males. | Females. | Total. |
|--|----|----|----|--|--------|----------|--------|
| In Asylum on 31st December, 1892, | | | | | 136 | 21 | 149 |
| Admitted during the year 1893, | | | | | 20 | 6 | 26 |
| Total number under treatment during year, . | | | | | 148 | 29 | 177 |
| Discharged during the year— | | | | | | | |
| | M. | F. | T. | | | | |
| Recovered, | 4 | 1 | 5 | | | | |
| Improved, | 6 | 1 | 7 | | | | |
| Unimproved or incurable, | 1 | 1 | 2 | | | | |
| Deaths during the year— | | | | | | | |
| From Natural Causes, | 6 | — | 6 | | | | |
| From Accidental Causes, | — | — | — | | | | |
| By Suicide, | — | — | — | | | | |
| Escapes during the year, | | | | | 1 | — | 1 |
| Total discharges, deaths, and escapes during year, | | | | | 18 | 3 | 21 |
| Remaining in Asylum on 31st December, 1893, | | | | | 150 | 26 | 156 |
| Daily average number of patients in Asylum during 1893, . | | | | | 158 | 24 | 182 |
| Per-centage of deaths on daily average number of Patients, . | | | | | — | — | 2.9 |

TABLE III.—Showing the Crimes of the Patients who were Admitted during the Year 1893, and also of those Remaining on the 31st December, 1893; together with the Period at which Insanity was recognised.

| CRIME. | ADMISSIONS. | | | | | | | | | | REMAINING. | | | | | | | | | | | | | | | | | | | |
|--|--|----|----|----|----|--------------------------------------|----|----|----|----|--|----|----|----|----|--|----|----|----|----|--------------------------------------|-----|----|-----|--|--|--|--|--|--|
| | Period at which Insanity was recognised. | | | | | | | | | | Period at which Insanity was recognised. | | | | | | | | | | | | | | | | | | | |
| | Found Insane on Arraignment and incapable of Pleading. | | | | | Acquitted on the ground of Insanity. | | | | | Certified to be Insane while undergoing sentence of Penal Servitude. | | | | | Found Insane on Arraignment and incapable of Pleading. | | | | | Acquitted on the ground of Insanity. | | | | | Certified to be Insane while undergoing sentence of Penal Servitude. | | | | |
| | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | Total Number remaining on 31st December, 1892. | | | | | |
| Murder, | 4 | 1 | 5 | 1 | — | 1 | — | 1 | 6 | 5 | 9 | 41 | 11 | 52 | 23 | 3 | 26 | 11 | 2 | 13 | 75 | 16 | 91 | | | | | | | |
| Violent Assault, | 1 | — | 1 | 1 | — | — | — | — | 2 | — | 2 | 11 | 1 | 12 | 9 | 1 | 10 | — | — | — | 20 | 2 | 22 | | | | | | | |
| Common Assault, | 1 | — | 1 | 1 | — | 1 | — | 1 | 3 | — | 3 | 1 | — | 1 | 2 | — | 2 | 2 | — | 2 | 5 | — | 5 | | | | | | | |
| Rape or Attempt, | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | 1 | — | 1 | 1 | — | 1 | | | | | | | |
| Arson, | 2 | — | 2 | — | — | — | — | — | 2 | — | 2 | 7 | — | 7 | — | — | — | — | — | — | 7 | — | 7 | | | | | | | |
| Theft, | — | — | — | — | — | — | 1 | 3 | 4 | 3 | 4 | 5 | — | 3 | 2 | — | 2 | 4 | 5 | 9 | 5 | 14 | | | | | | | | |
| Burglary, | 2 | — | 2 | — | — | 2 | — | 2 | 4 | — | 4 | 4 | — | 4 | — | — | — | — | 2 | 6 | — | 6 | | | | | | | | |
| Attempt at Suicide, | — | — | — | — | — | — | 1 | 1 | — | 1 | 1 | — | — | — | — | — | — | — | 1 | 1 | — | 1 | | | | | | | | |
| Breach of the Articles of War, | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | | | | | | | |
| Other Offences, | — | — | — | — | — | — | 1 | 3 | 2 | 1 | 3 | 3 | — | 3 | — | 1 | 1 | 4 | 1 | 3 | 7 | 2 | 9 | | | | | | | |
| Total, | 18 | 1 | 11 | 3 | 2 | 6 | 7 | 4 | 11 | 20 | 5 | 28 | 70 | 12 | 42 | 36 | 5 | 41 | 25 | 9 | 33 | 120 | 50 | 166 | | | | | | |

TABLE IV.—Showing the previous Mental History of the Patients who were admitted during the Year 1893.

| | Males. | Females. | Total. |
|---|--------|----------|--------|
| Re-admissions, | 2 | — | 2 |
| First admission, but stated not to be the first attack of Insanity, | 1 | — | 1 |
| First attack, or no information on the subject, | 17 | 8 | 25 |
| Total, | 20 | 8 | 28 |
| Known to have actually attempted suicide, | 1 | 1 | 2 |
| Regarded as being Suicidal, | 3 | 1 | 4 |
| Stated not to have attempted suicide, or no information on the subject, | 16 | 6 | 22 |
| Total, | 20 | 8 | 28 |
| Affected with Epilepsy or Epileptiform Convulsions, | 1 | — | 1 |
| Not so affected, | 19 | 8 | 27 |
| Total, | 20 | 8 | 28 |

TABLE V.—Showing the Form of Mental Disease in the Patients who were admitted during the Year 1893, and also in those remaining on the 31st December, 1893.

| Form of Disease. | Admissions. | | | Remaining on 31st December, 1893. | | |
|--|-------------|----|----|-----------------------------------|----|-----|
| | M. | F. | T. | M. | F. | T. |
| Mania, | 7 | 3 | 10 | 84 | 12 | 96 |
| Melancholia, | 7 | 4 | 11 | 8 | 9 | 17 |
| Dementia, | 2 | — | 2 | 19 | — | 19 |
| Monomania, | — | — | — | — | — | — |
| General Paralysis, | 1 | — | 1 | 1 | — | 1 |
| Idiocy, | 2 | — | 2 | 6 | 2 | 8 |
| Partial Insanity, | — | 1 | 1 | — | 1 | 1 |
| Mental affections complicated with Epilepsy, | — | — | — | 7 | 1 | 8 |
| Supposed not Insane, | 1 | — | 1 | 5 | 1 | 6 |
| Total, | 20 | 8 | 28 | 120 | 26 | 146 |

TABLE VI.—Showing the numbers of those remaining on 31st December, 1893, who were affected with Epilepsy and Paralysis.

| | Males. | Females. | Total. |
|-----------------------------------|--------|----------|--------|
| Epilepsy, | 9 | 1 | 10 |
| Paralysis, | 1 | — | 1 |
| Epilepsy and Paralysis, | — | — | — |
| Total, | 10 | 1 | 11 |

TABLE VII.—Showing the Ages of the Patients who were Admitted, Discharged, and who Died during the Year 1893, and also of those remaining on 31st December, 1893.

| Ages. | Admissions. | | | Discharges. | | | Deaths. | | | Remaining on 31st December, 1893. | | |
|---------------------|-------------|----|----|----------------------|--|----|---------|----|----|-----------------------------------|----|----|
| | | | | Given up to Friends. | Transferred to other Asylums or Prisons. | | | | | | | |
| From 5 to 10 Years. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| .. 10 to 15 .. | - | - | - | - | - | - | - | - | - | - | - | - |
| .. 15 to 20 .. | 2 | - | 2 | - | - | - | - | - | - | 2 | - | 2 |
| .. 20 to 25 .. | 3 | 3 | 6 | - | - | 5 | - | 5 | 2 | 2 | 14 | 20 |
| .. 25 to 30 .. | 5 | 3 | 8 | 1 | - | 1 | 2 | 2 | 4 | 1 | - | 40 |
| .. 30 to 35 .. | 3 | 2 | 7 | 1 | - | 1 | - | - | 1 | - | 1 | 28 |
| .. 35 to 40 .. | 4 | - | 4 | - | - | - | 1 | 1 | 1 | - | 1 | 29 |
| .. 40 to 45 .. | 1 | - | 1 | - | - | 1 | - | 1 | - | - | - | 13 |
| .. 45 to 50 .. | - | - | - | - | - | - | - | - | - | - | 2 | - |
| .. 50 to 55 .. | - | - | - | 1 | - | 1 | - | - | 1 | - | 1 | 12 |
| .. 55 to 60 .. | - | - | - | - | - | - | - | - | - | - | - | - |
| .. 60 to 65 .. | - | - | - | - | - | - | - | - | - | - | - | - |
| .. 65 to 70 .. | - | - | - | - | - | - | - | - | - | - | - | - |
| .. 70 to 75 .. | - | - | - | - | - | - | - | - | - | - | - | - |
| .. 75 to 80 .. | - | - | - | - | - | - | - | - | - | - | - | - |
| .. 80 to 85 .. | - | - | - | - | - | - | - | - | - | - | - | - |
| .. 85 to 90 .. | - | - | - | - | - | - | - | - | - | - | - | - |
| .. 90 and upwards. | - | - | - | - | - | - | - | - | - | - | - | - |
| Unascertained. | - | - | - | - | - | - | - | - | - | - | - | - |
| Total. | 20 | 8 | 28 | 3 | - | 3 | 8 | 3 | 11 | 6 | - | 6 |

Males. Females.

Average age at death, 44 —

TABLE VIII.—Showing the Educational Condition of Patients who were admitted during the Year 1893, and also of those remaining on 31st December, 1893.

| — | Admissions. | | | Remaining on 31st December, 1893. | | |
|------------------------------------|-------------|----|----|-----------------------------------|----|-----|
| | M. | F. | T. | M. | F. | T. |
| Well Educated, | 1 | - | 1 | 2 | - | 2 |
| Can Read and Write well, | 1 | - | 1 | 20 | - | 20 |
| .. Indifferently, | 6 | 3 | 9 | 25 | 13 | 38 |
| Can Read only, | 3 | 2 | 5 | 3 | 2 | 5 |
| Cannot Read or Write, | 7 | 3 | 10 | 8 | 6 | 14 |
| Unascertained, | 2 | - | 2 | 62 | 3 | 67 |
| Total, | 20 | 8 | 28 | 130 | 26 | 156 |

TABLE IX.—Showing the Social Condition as to Marriage of Patients who were Admitted, Discharged, and who Died during the Year 1893, and also of those remaining on 31st December, 1893.

| — | Admissions. | | | Discharges. | | | | | | Deaths. | | | Remaining on 31st December 1893. | | |
|------------------------|-------------|----|----|----------------------|----|----|-------------------------------|----|----|---------|----|----|---|----|-----|
| | | | | Given up to Friends. | | | Transferred to other Asylums. | | | | | | | | |
| Married, . . . | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| Single, . . . | 6 | 3 | 9 | 1 | — | 1 | 2 | 2 | 4 | 2 | — | 2 | 24 | 6 | 30 |
| Widowed, . . . | 3 | 4 | 13 | — | — | — | 6 | 1 | 6 | 1 | — | 1 | 20 | 14 | 37 |
| Not ascertained, . . . | 4 | 1 | 5 | 2 | — | 2 | — | — | — | 1 | — | 1 | 15 | 2 | 17 |
| Total, . . . | 2 | — | 2 | — | — | — | 1 | — | 1 | 2 | — | 2 | 68 | 4 | 72 |
| | 20 | 6 | 26 | 3 | — | 3 | 8 | 3 | 11 | 6 | — | 6 | 130 | 26 | 156 |

TABLE X.—Showing the Previous Occupation of Patients remaining in Asylum on 31st December, 1893.

| — | Male. | Female. | Total. |
|---|-------|---------|--------|
| Agriculturists, | 47 | 1 | 48 |
| Domestic Servants, | — | 4 | 4 |
| Clerks, | 1 | — | 1 |
| Shopkeepers, | 5 | 1 | 6 |
| Tailors and Seamstresses, | 1 | 1 | 2 |
| Painters and Glaziers, | 2 | — | 2 |
| Smiths and Workers in Metals, | 2 | — | 2 |
| Masons and Bricklayers, | 2 | — | 2 |
| Carpenters, | 1 | — | 1 |
| Shoemakers, | 1 | — | 1 |
| Peelers and Hucksters, | 1 | 1 | 2 |
| Members of Religious Communities, | 1 | — | 1 |
| Soldiers and Pensioners, | 2 | — | 2 |
| Police, | 1 | — | 1 |
| Sailors, | 2 | — | 2 |
| Mendicants, | 4 | — | 4 |
| Various other employments, | 7 | — | 7 |
| No occupation, or unascertained, | 50 | 16 | 66 |
| Total, | 130 | 26 | 156 |

TABLE XI.—Showing the causes of the Deaths during the Year 1893.

| Initials. | Male. | Female. | Age. | Cause of Death. |
|-----------|-------|---------|------|-------------------------|
| J. B. . . | 1 | - | 59 | Tuberculosis. |
| M. B. . . | 1 | - | 28 | Tuberculosis. |
| P. J. . . | 1 | - | 46 | Heart Disease. |
| J. H. . . | 1 | - | 35 | Tuberculosis. |
| P. M'G. . | 1 | - | 24 | Heart and Lung Disease. |
| J. D. . . | 1 | - | 81 | Peritonitis. |
| Total, . | 6 | - | - | |

TABLE XII.—Showing the Daily Average Number of Patients employed during the Year 1893.

| Male Employment. | Number Employed. | Female Employment. | Number Employed. |
|--|------------------|--|------------------|
| Farm and Garden, . . . | 23 | Laundry, | 6 |
| Housecleaners, | 19 | Needlework, | 4 |
| Tailors, | 5 | Scrubbing and Scouring, . . | 6 |
| Upholsterers, | 3 | Miscellaneous, | - |
| Shoemakers, | 2 | Unemployed, on special exercise, or confined to bed. | 8 |
| Stokers, | 4 | | |
| Painter, | 1 | | |
| Clerks, | 2 | | |
| Laundrymen, | 2 | | |
| Stores, | 1 | | |
| Yard, Cows, Piggery, &c. . | 2 | | |
| Net Maker, | 1 | | |
| Miscellaneous (including pumping water). | 6 | | |
| Unemployed, on special exercise, or confined to bed. | 54 | | |
| Total, | 126 | Total, | 24 |

TABLE XIV.—Account of the Sum Expended, compared with the Sum Granted by Parliament for the Central Asylum in the Year ended 31st March, 1894, showing a Surplus or Deficit upon each sub-head of the Vote.

| Service, | Parliamentary Grant. | Expenditure.* | Expenditure compared with Grant. | |
|---|----------------------|-------------------|----------------------------------|--------------------|
| | | | Less than granted. | More than granted. |
| | £ s. d. | £ s. d. | £ s. d. | £ s. d. |
| Salaries and Wages, | 3,053 0 0 | 2,944 0 3 | 78 19 9 | — |
| Victualling | 2,560 0 0 | 2,302 11 0 | 250 9 0 | — |
| Uniform for Attendants and Clothing for Patients, | 510 0 0 | 465 15 10 | 44 4 2 | — |
| Gratuities for Patients, . . . | 185 0 0 | 57 17 6 | 157 2 6 | — |
| Medicines and Surgical Instruments, | 40 0 0 | 37 19 8 | 2 0 4 | — |
| Escort and Conveyance of Patients, | 50 0 0 | 22 0 0 | 28 0 0 | — |
| Incidental Expenses. | 80 0 0 | 79 11 4 | 0 8 8 | — |
| Total, | 6,458 0 0 | 5,896 15 7 | 561 4 5† | — |

* The sum (£1 14s. 6d.), realized by the sale of offal and old stores, and paid over to H.M.'s Exchequer through the Paymaster-General, has not been included in this Table—nor has the expenditure on the Farm been included.

† This sum, plus the difference between the receipts and expenditure on the farm and garden, is equivalent to the "Balance to be surrendered" (vide previous Table).

TABLE XV.—DETAILED STATEMENT OF SALARIES and WAGES, showing the Rates of Pay and Allowances, as well as the actual Payments for the Year ended 31st March, 1894.

| No. actually employed. | Description of Office. | Salary of Office. | | | Allowances. | Valued at |
|------------------------|----------------------------------|-------------------|------------------|----------|-----------------------------|-----------|
| | | Minimum. | Annual Increase. | Maximum. | | |
| | | £ s. d. | £ d. | £ s. d. | | £ s. d. |
| 1 | Resident Physician and Governor. | 600 0 0 | 20 0 0 | 700 0 0 | House and garden. | 100 0 0 |
| 1 | Assistant Physician. | 200 0 0 | — | 200 0 0 | Apartment, fuel, and light. | 50 0 0 |
| 1 | Visiting Physician. | — | — | 175 0 0 | — | — |
| 1 | Clerk and Storekeeper. | 140 0 0 | 10 0 0 | 200 0 0 | For horse. | 30 0 0 |
| 1 | Assistant Clerk and Storekeeper. | 80 0 0 | 5 0 0 | 100 0 0 | For house. | 15 0 0 |
| 2 | Chaplain. | — | — | 155 0 0 | — | — |
| 1 | Head Attendant (Male). | 80 0 0 | 2 10 0 | 110 0 0 | — | 21 10 0 |
| 4 | Charge Attendant (Male). | 52 0 0 | 1 10 0 | 53 0 0 | — | 40 0 0 |
| 12 | Do. do. (do.). | 42 0 0 | 1 0 0 | 50 0 0 | — | 40 0 0 |
| 10 | Assistant Attendants (Male). | 30 0 0 | 1 0 0 | 40 0 0 | — | 40 0 0 |
| 1 | Head Attendant (Female). | 40 0 0 | 2 0 0 | 52 0 0 | — | 37 0 0 |
| 8 | Charge Attendants (Female). | 30 0 0 | 1 0 0 | 33 0 0 | — | 25 0 0 |
| 8 | Do. do. (do.). | 18 0 0 | 1 0 0 | 20 0 0 | — | 20 0 0 |
| 1 | Farm Yardman. | 3s. | 6d. per day. | | | |
| 1 | Boy Messenger. | 1s. | 2d. per day. | | | |

CENTRAL CRIMINAL LUNATIC ASYLUM (DUNDRUM).

MEMORANDUM OF INSPECTION.

On my inspection of this institution, I find that since the beginning of the year the following changes have taken place amongst the patients:—

Inspected on
28th Dec.,
1898.

| — | Males. | Females. | Total. |
|---|--------|----------|--------|
| On the Books of the Asylum (1st January, 1893), | 128 | 21 | 149 |
| Admitted since, | 20 | 8 | 28 |
| Total, | 148 | 29 | 177 |
| Discharged recovered, | 4 | 1 | 5 |
| Discharged unrecovered, | 7 | 2 | 9 |
| Died, | 6 | — | 6 |
| Escaped, | 1 | — | 1 |
| Total, | 18 | 3 | 21 |
| Remaining on 28th December, 1893, | 130 | 26 | 156 |

No death from suicide or accident is reported; all were from natural causes. In each case a Coroner's inquest and post-mortem examination were held.

The general health of the patients appeared good; one man was confined to bed with erysipelas.

In the Board of Works is vested the legal responsibility of carrying out all structural alterations and additions; not alone are all such works done by the employes of the Board, but even minor repairs and small jobs, such as whitewashing, are done by its workmen. This is to be regretted, as it not alone deprives the patients of the most suitable forms of employment, but leaves no incentive to the staff of the asylum to take an interest in the care and protection of the fabric of the institution. At the same time a great deal of most useful work is being carried out at present—new and extensive stores are being provided—the top story on the female side is being fitted up with single rooms, and when these are completed this story will be cut off from the female wards and added to the male divisions, a separate entrance from the male side being provided by a corridor passing through the old Catholic Chapel—detached buildings having been set apart, and suitably fitted up for Catholic and Protestant worship.

The single rooms provided would appear very suitable for the purpose for which they are intended; they are fitted with double doors, and strong shutters, while each room is lighted by a separate gas jet over the door.

The staff consists of twenty-four men and twelve women; of the latter, however, one acts as hall-maid, and three are employed in the laundry.

Night duty is performed on the male side by two permanent attendants, on the female side when necessary one of the female staff sits up at night. It is proposed, however, to appoint a permanent night-nurse. The proportion of attendants to patients is, therefore, about one to five, not too strong a staff when it is considered how important it is that such an institution should never be undermanned, as the inmates are only too ready to take advantage of any weakening of the numbers which may occur in case of emergency. Not alone should the staff be a strong one, but it should be composed of persons in whom the Governor has entire confidence.

In accordance with the recommendations of the Committee, the Treasury have sanctioned a scale of wages which ought to attract suitable candidates for the various responsible posts existing in the institution, and I have every hope that the efficiency of the staff and the conduct of the attendants will show that the Committee acted wisely in their recommendations.

As regards the ministration of religion, the records show that on last Sunday 75 men and 16 women attended their respective places of worship. These returns would not appear, however, to be made out from the chaplains' book, but from the "ward lists" kept by the charge attendants. In future the chaplains' book should show the numbers attending the services, the duration of it, and the manner in which the patients conducted themselves. These returns should be signed by the officiating clergymen.

As regards employment, 81 men and 18 women are returned as engaged in some occupation; of these 23 men work on the farm, 13 assist the tradesmen, 2 men and 7 women are employed in the laundry, and 3 women sew. The number of patients employed has rapidly increased since the system of payments for work done has been sanctioned by the Treasury. These payments range from 1d. to 3d. per day according to the amount of work done and the value of it.

The sanction of the Treasury has also been obtained to the outlay of a certain sum on the amusements and entertainment of the patients. Various indoor games are provided, and out of doors cricket and football are enjoyed by attendants and patients together.

The Central Asylum,
Dundrum, Co. Dublin,
19th June, 1894.

GENTLEMEN,—I have the honour to lay before you the usual statistical tables for the year 1893, and the financial statement for the year ended 31st March, 1894.

The admissions were twenty-eight in number, an increase of ten. Admissions. Twenty males and eight females were admitted, as against fifteen and three, respectively, in 1892. Thus half the total increase is due to Increase of the number of female admissions. The number of those admitted under the charge of murder were, males 5, females 3. In the year 1892 the numbers were, males 5, females 3. As the number of admissions increased by over 30 per cent., it is evident that there has been a decline Chiefly in females. Decline in cases of capital crime.

Five patients were discharged recovered, seven improved, and two as incurable. There were six deaths, all males, and from natural causes. Recoveries. Deaths. The usual inquest was held in each case. One man made his escape from the third storey in a manner almost unique. He was assisted by a number of patients in the same dormitory, thus bearing out the opinion I expressed in 1891, that criminal lunatics should sleep in single rooms. Case of escape. Associated dormitories. In no other way can the remarkable powers of combination they possess be successfully encountered.

A male patient was remitted to Mountjoy Prison as it was considered that he was feigning insanity. He has since been readmitted from prison under fresh certificates. I still regard him as a malingerer. Malingering.

The total number under treatment was 177, an increase of 16. The average number resident was 152 as against 146 in the previous year. Statistics. The percentage of deaths on the daily average was 3·9, a decided increase which I regard as accidental.

The year has been quiet and uneventful, with the unfortunate exception discussed above. There were no accidents, assaults, or attempts at suicide, nor any approach to the state of dangerous disorder which in previous times necessitated the aid of the police. The conduct of the staff has been excellent on the whole, and there have been but few changes. The staff has formed a Gymnastic Club at their own expense, and I hope the movement will be assisted by the provision of a Gymnasium in the grounds for the use of patients and attendants. The year. Maintenance of order and discipline. Freedom from accident, suicide, or disorder. Conduct of staff, few changes in Gymnastics. Influenza.

In June a sharp epidemic of influenza was experienced. The cases were nearly all on the male side, one half of the staff were attacked, but only one fourth of the number of patients suffered. There were no fatal cases. I am pleased to be able to report that the male attendants who were not attacked displayed a splendid spirit, and performed treble duty, and forfeited their leave, without a murmur, and the partially convalescent insisted in sharing the work of nursing before they were really fit for the exertion. Male staff, energy and devotion to duty.

Practically all the recommendations of the Commission of 1891 have been adopted, or adopted with modifications. The strengthening of the Governor's position was by no means the least important recommendation. It has, however, been found necessary to modify the plans of structural alteration embodied in the Report of the Commission. The entire female wing has been cut up to form single rooms of the best Commission of 1891. Structural alterations.

| | |
|---|---|
| Single rooms. | type. The single rooms are large and well ventilated, comfortable and secure, and allow the exercise of perfect supervision, without either disturbing the patient or bringing him into contact with the supervising attendant. The third storey of the female wing will be occupied by males at night, but not during the day, and I hope in time that I shall be able to arrange that the corridors of single rooms will not be used as dayrooms, as at present. This will be a double gain, hygienic and disciplinary conditions being equally improved. There will be a reduction in the accommodation for females. In addition to this extensive work, a fine range of stoves and spacious tradesmen's workrooms have been constructed, and will be ready for occupation this summer. The new church and chapel have been in use for some months, but are sadly in need of redecoration. A commodious messroom for the male attendants is on the point of completion, and the adjoining rooms will, when I can spare them, form pleasant waiting and recreation rooms. I will thus complete a suite of pleasant rooms, centrally situated, and convenient in cases of emergency, and calculated to render the hours of freedom from duty enjoyable and really restful. A large recreation hall has been provided in the central buildings, and I hope to organise some entertainments next winter. The hall is, however, destitute of decoration. A large sanitary annexe will shortly be completed, and the sanitation and hygienic fittings and fixtures are superior to anything I have seen in the best asylums. The brittle lime-putty and unsightly whitewash have been replaced by cement on the female side, and I hope to persuade the Board of Public Works that oil-paint is economical and may be artistic. A partial installation of hydrants with automatic fittings has been effected, but I shall be uneasy till the system is applied to every department. The main needs of the asylum are now, the resection of the male wing on the lines adopted on the female side, a system of heating, suitable boilers and cisterns for the supply of hot water, the refitting of the laundry and the supply of steam-power machinery, electric fire alarms, and night recorders, and the provision of an isolation ward with separate airing-court, dining-room, and sanitary block. |
| Sleeping quarters to be completely cut off from day quarters. | |
| Stoves. | |
| Workshops. | |
| Accommodation for Divine worship. | |
| Male mess-room. | |
| Recreation hall. | |
| Sanitary blocks. | |
| Hydrants. | |
| Essential improvements not yet sanctioned. | |
| Visit of His Excellency the Lord Lieutenant. | In April, His Excellency the Lord Lieutenant visited the asylum, and inspected the wards, dormitories, and working parties, and was graciously pleased to express his approval of the arrangements. His Excellency was received by the patients quietly and respectfully, and this fact becomes remarkable when we remember that the majority of patients are confined during the pleasure of the Lord Lieutenant. The moral effect of this visitation was distinctly beneficial, and decidedly strengthened my hands. |
| Reception. | |
| Effect. | |
| Financial. | The financial statement appended shows that substantial economies have been effected on the reduced estimates. The profits on the farm and garden have increased still further. I attribute this satisfactory condition not only to the fact that there are fifty labourers, but also to the interest and energy exhibited, and to the good feeling which exists between the attendants and patients in question. |
| Profits on farm and garden. | |
| Cause. | |
| Gratuities to patients. | The gratuities to patients now reach a substantial sum, and in the case of discharged patients I was able to make small grants to enable them to begin life afresh. Nothing could be more opposed to the best instincts of human nature, than to cast on the world a patient with the double disability of insanity and criminality, without affording him some pecuniary assistance. In the case of a patient whose aged sister undertook a long journey to complete the release of her recovered brother, I am proud to be able to report that, in addition to the gratuity |
| After care of discharged patients. | |

I was able to award, the patient received the sum of two pounds which was subscribed voluntarily and at a moment's notice by the male attendants. Nothing could more clearly show the improved relation of the patients to the attendants, whom they no longer regard as mere turn-keys and keepers.

Good feeling
between
patients and
attendants.

A sum of £40 has been sanctioned in the estimates for the current year to promote the amusement and education of the convalescent and well-conducted patients. This will enable me to extend my efforts in this direction, and I hope that the results will be as gratifying in the future as they have been in the past.

Amusement
of patients.
Results of.

I regret to say that the vote for structural alterations is totally inadequate to meet the urgent needs of the asylum, and I am much disheartened by the prospect of postponing progress until the commencement of the financial year 1895-96.

Postponement
of alterations
owing to want
of funds.

I am, Gentlemen,

Your obedient servant,

GEORGE REYINGTON.

To the Inspectors of Lunatics.

NOTES ON ADMISSIONS IN 1893.

MALES.

T. A., admitted from Kilkenny Prison, charged with assault and robbery. A case of acute melancholia, health poor. Has improved mentally and physically. Is usefully employed on the farm.

O. M., admitted from Sligo Prison, charged with murder. A case of simple melancholia. There is a strong neurotic diathesis. Has made a good recovery, and has been employed on the farm since admission.

S. O'K., admitted from Cork Prison, charged with felonious entry. A well marked case of general paralysis of the insane, which is very rare in the criminal classes. Is now extremely feeble and paralysed.

P. D., admitted from Mountjoy Prison, charged with murder, and sentenced to death, commuted to penal servitude for life. A case of hyperacute melancholia with vivid hallucinations and active delusions. Health poor, well marked neurotic and tubercular diathesis. Has reached recovery more than once, only to relapse. Is suicidal and at times is so afraid of being murdered as to become dangerous. When well is a good farm labourer.

J. G., admitted from Belfast Prison, charged with shooting at with intent to kill. A case of melancholia with delusions. The disease is probably the result of drink. Has become very stout and has made a good recovery.

P. L., admitted from Galway Prison, charged with murder. Had been acutely maniacal previous to admission. While here presented symptoms of melancholia. Has made a good recovery.

M. B., admitted from Mountjoy Prison, charged with assault. A case of chronic mania with extreme exaltation, incoherence and excitement, and little prospect of recovery.

F. F., or J. C., admitted from Kilmainham Prison, charged with theft. This patient was under treatment here in 1888, while undergoing eighteen months hard labour. A case of chronic mania with exaltation.

J. C., admitted from Tralee Prison, charged with shooting with intent to murder. A case of transitory mania. Has made a good recovery.

F. K., re-admitted from Londonderry Prison. Had been remitted there to undergo trial, as he had been certified sane. I hope that his discharge will be granted at an early date.

P. C., admitted from Londonderry Prison, charged with burglary. A case of chronic mania, with but little hope of improvement. He is a tramp, and quite unknown in the district where he committed the crime. Nothing can be elicited as to his previous history.

R. M., admitted from Mountjoy Prison charged with housebreaking. While decidedly of the criminal type, I arrived at the conclusion that he was feigning insanity. He was accordingly remitted to Mountjoy Prison.

F. O'N., admitted from Londonderry Asylum, charged with assault. A case of mania with delusions and hallucinations. Has been employed on the land from the first, and has improved both mentally and physically.

P. G., or J. M., admitted from Wexford Prison, charged with burglary. A case of mania with delusions. Had been violent in prison, but well conducted here. He was confined in the Richmond Asylum in 1884.

M. C., admitted from Mountjoy Prison, charged with felony. A case of acute melancholia. Previous to admission, he made many attempts to commit suicide. He is of the criminal type, with many previous convictions.

J. D. O., admitted from Mountjoy Prison, charged with sheep-stealing. Is markedly of the criminal type, with nine previous convictions, and spent half his life in prison. He had been in Ireland only for a few weeks. Is an extremely intelligent and ingenious man, and it is difficult to say where the criminality ends and insanity begins. He has gained self-control, and is now somewhat depressed.

P. W., admitted from Kilmainham Prison, charged with murder. Is but seventeen years of age, and the subject of congenital imbecility. Both parents were intemperate. He is usefully employed.

M. C., admitted from Sligo Prison, charged with arson. Is the subject of a minor degree of congenital imbecility with supervening melancholia. Works on the farm and has improved mentally and physically.

J. S., admitted from Belfast Prison, charged with arson. Is stone deaf, weakminded, and incoherent.

A. M'M., admitted from Belfast Prison, charged with murder. Is weakminded and the subject of hallucinations of sight and hearing. He has no recollection of the circumstances of the murder.

FEMALES.

C. W., admitted from Sligo Prison, charged with murder. A case of chronic melancholia. She has improved mentally and physically, but I fear that she is sinking slowly into dementia.

M. J. S., admitted from Londonderry Prison, charged with murder. A case of chronic melancholia, which has improved considerably. There is a neurotic taint in the family.

E. B., admitted from Grangegorman Prison, charged with murder. A case of puerperal insanity. She was found, on admission, to be suffering from consumption in an advanced stage.

M. A. K., admitted from Grangegorman Prison, charged with attempted suicide. A case of chronic mania with delusions and hallucinations. Has improved considerably.

E. D., admitted from Grangegorman Prison, charged with larceny. A case of melancholia with hallucinations. Has improved considerably. Is a highly neurotic person. Father is intemperate.

B. J., admitted from Grangegorman Prison, charged with larceny. A case of melancholia with delusions and hallucinations. Is slowly improving.

M. H., or M. B., admitted from Grangegorman Prison, charged with malicious damage. A case of chronic mania with hallucinations. An impulsive, dangerous woman, erotic and vindictive. I fear that there is no hope of recovery.

E. S., admitted from Grangegorman Prison, charged with stealing. A case of chronic melancholia. Essentially of the criminal type, thirty-three previous convictions, alcoholic habits, in delicate health. She has improved, but I fear she would relapse if she returned to her former mode of life.

GEORGE REVINGTON, M.D.

Resident Physician and Governor.

23rd April, 1894.

APPENDIX C.

PRIVATE ASYLUMS.

TABLE I.—Showing the number of Patients remaining in the Private Asylums on the 31st December of each year from 1880 to 1893, inclusive.

| YEARS. | Males. | Females. | Total. |
|---------------|--------|----------|--------|
| 1880, | 236 | 386 | 622 |
| 1881, | 233 | 397 | 635 |
| 1882, | 254 | 396 | 650 |
| 1883, | 247 | 389 | 636 |
| 1884, | 244 | 395 | 639 |
| 1885, | 243 | 389 | 632 |
| 1886, | 233 | 369 | 602 |
| 1887, | 239 | 386 | 625 |
| 1888, | 240 | 361 | 601 |
| 1889, | 259 | 372 | 631 |
| 1890, | 253 | 368 | 621 |
| 1891, | 266 | 366 | 632 |
| 1892, | 275 | 369 | 644 |
| 1893, | 281 | 361 | 642 |

TABLE II.—Showing the Numbers Licensed for, as also the Total Number of Patients under Treatment in each Asylum during the year 1893, together with the Number Remaining at the close thereof.

| ASYLUMS. | Number Licensed for. | | | Total Number under Treatment during 1893. | | | Number Remaining on 31st December, 1893. | | |
|---|----------------------|----|----|---|-----|-----|--|-----|-----|
| | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| Allen Retreat, Co. Armagh, . | 20 | 15 | 35 | 23 | 17 | 40 | 20 | 12 | 32 |
| Bloomfield, Co. Dublin, . | — | — | — | 15 | 25 | 40 | 11 | 20 | 31 |
| Course Lodge, Co. Armagh, . | — | 15 | 15 | — | 15 | 15 | — | 9 | 9 |
| Elm Lawn, Co. Dublin, . | — | 10 | 10 | — | 6 | 6 | — | 6 | 6 |
| Esker House, Co. Dublin, . | — | — | — | — | 2 | 2 | — | — | — |
| Farham House and Maryville, Co. Dublin. | 30 | 26 | 56 | 21 | 29 | 50 | 19 | 26 | 45 |
| Glenside, Co. Antrim, . | 5 | — | 5 | 7 | — | 7 | 2 | — | 2 |
| Hampstead House, Co. Dublin, . | 29 | 1 | 30 | 25 | — | 25 | 21 | — | 21 |
| Hartfield House, Co. Dublin, . | 25 | — | 25 | 21 | — | 21 | 18 | — | 18 |
| Highfield House, Co. Dublin, . | — | 22 | 22 | — | 23 | 23 | — | 14 | 14 |
| Lindville, Co. Cork, . | 8 | 16 | 24 | 6 | 15 | 21 | 6 | 18 | 19 |
| Lisle House, Co. Dublin, . | — | 10 | 10 | — | 3 | 3 | — | — | — |
| Rathgar House, Co. Dublin, . | — | 4 | 4 | — | 3 | 3 | — | 2 | 2 |
| St. John of God, Co. Dublin, . | 60 | — | 60 | 76 | — | 76 | 53 | — | 53 |
| St. Patrick's, Belmont Park, Co. Waterford. | 40 | — | 40 | 44 | — | 44 | 35 | — | 35 |
| St. Patrick's (Swift's), Dublin City, | — | — | — | 46 | 68 | 114 | 37 | 59 | 96 |
| St. Vincent's, Co. Dublin, . | — | — | — | — | 127 | 127 | — | 105 | 105 |
| Stewart Institution, Co. Dublin, . | — | — | — | 68 | 84 | 152 | 59 | 65 | 124 |
| Verville, Clontarf, Co. Dublin, . | — | 25 | 25 | — | 27 | 27 | — | 23 | 23 |
| Woodbine Lodge, Co. Dublin, . | — | 10 | 10 | — | 8 | 8 | — | 7 | 7 |
| Total, | | | | 352 | 452 | 804 | 281 | 361 | 642 |

TABLE III.—Showing for each of the Private Lunatic Asylums during the Year ended

| ASYLUMS. | ADMISSIONS. | | | | | | | | | DISCHARGES. | | | | | | | | |
|---|-----------------------|----|----|-------------------|----|-----|------------------------|----|-----|-------------|----|----|-----------|----|----|--------------------------|----|----|
| | Net First Admissions. | | | First Admissions. | | | Total Number Admitted. | | | Recovered. | | | Improved. | | | Unimproved or Incurable. | | |
| | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| Allen Retreat, Co. Armagh, | 2 | - | 2 | 5 | 2 | 5 | 5 | 2 | 7 | - | 5 | 5 | - | 2 | 2 | 5 | - | 5 |
| Bloomfield, Co. Dublin, | - | - | - | 5 | 4 | 7 | 5 | 4 | 7 | 2 | 1 | 3 | 1 | 5 | 4 | 1 | 1 | 2 |
| Course Lodge, Co. Armagh, | - | 2 | 2 | - | 5 | 5 | - | 5 | 5 | - | 5 | 5 | - | 1 | 1 | - | 2 | 2 |
| Elm Lawn, Co. Dublin, | - | - | - | - | 1 | 1 | - | 1 | 1 | - | - | - | - | - | - | - | - | - |
| Essex House, Co. Dublin, | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | 2 |
| Farnham House and Maryville, Co. Dublin, | - | - | - | 5 | 4 | 7 | 5 | 4 | 7 | 1 | 1 | 2 | - | 1 | 1 | - | - | - |
| Glenada, Co. Antrim, | - | - | - | 5 | - | 5 | 5 | - | 5 | 2 | - | 2 | 2 | - | 2 | 1 | - | 1 |
| Hampstead House, Co. Dublin, | 1 | - | 1 | 5 | - | 5 | 4 | - | 4 | 1 | - | 1 | 1 | - | 1 | 1 | - | 1 |
| Hartfield House, Co. Dublin, | 1 | - | 1 | 2 | - | 2 | 2 | - | 2 | 2 | - | 2 | - | - | - | - | - | - |
| Highfield House, Co. Dublin, | - | 5 | 5 | - | 1 | 1 | - | 6 | 6 | - | 4 | 4 | - | 5 | 5 | - | 1 | 1 |
| Lindville, Co. Cork, | - | - | - | - | 1 | 1 | - | 1 | 1 | - | 2 | 2 | - | - | - | - | - | - |
| Lisle House, Co. Dublin, | - | - | - | - | - | - | - | - | - | - | - | - | - | 1 | 1 | - | 2 | 2 |
| Rathgar House, Dublin, | - | - | - | - | - | - | - | - | - | - | 1 | 1 | - | - | - | - | - | - |
| St. John of God, Co. Dublin, | 10 | - | 10 | 17 | - | 17 | 27 | - | 27 | 5 | - | 5 | 5 | - | 5 | 5 | - | 5 |
| St. Patrick's, Belmont Park, Co. Waterford, | 2 | - | 2 | 8 | - | 8 | 10 | - | 10 | 6 | - | 6 | 1 | - | 1 | 1 | - | 1 |
| St. Patrick's (Swift's), Dublin City, | 1 | 4 | 5 | 8 | 9 | 17 | 9 | 15 | 22 | 5 | 5 | 8 | 1 | 2 | 5 | - | - | - |
| St. Vincent's, Co. Dublin, | - | 5 | 5 | - | 15 | 15 | - | 20 | 20 | - | 12 | 12 | - | 1 | 1 | - | 2 | 2 |
| Stewart Institution, Co. Dublin, | - | 4 | 4 | 10 | 15 | 25 | 10 | 15 | 25 | 1 | 5 | 6 | 6 | 8 | 14 | 2 | 2 | 4 |
| Verrill, Clonsilla, Co. Dublin, | - | 1 | 1 | - | 5 | 5 | - | 6 | 6 | - | 2 | 2 | - | 2 | 2 | - | - | - |
| Woodbine Lodge, Co. Dublin, | - | - | - | - | 2 | 2 | - | 2 | 2 | - | 1 | 1 | - | - | - | - | - | - |
| Total, | 17 | 21 | 38 | 60 | 62 | 122 | 77 | 83 | 160 | 27 | 40 | 67 | 12 | 24 | 39 | 12 | 15 | 24 |

the Number of Admissions, Discharges, Deaths, and Escapes,
31st December, 1893.

| | | | DEATHS. | | | | | | | | | ESCAPES. | | | TOTAL DISCHARGES, DEATHS, AND ESCAPES. | | | ASYLUMS. |
|--------------------------------|----|-----|--------------------|----|----|-----------------------|----|----|--------------------------|----|----|----------|----|----|---|----|-----|---|
| Total Number Discharged. | | | Natural Causes. | | | Accidental Causes. | | | Total Number Died. | | | | | | | | | |
| M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | |
| 3 | 5 | 8 | - | - | - | - | - | - | - | - | - | - | - | - | 3 | 5 | 8 | Allen Retreat, Co. Armagh. |
| 4 | 5 | 9 | - | - | - | - | - | - | - | - | - | - | - | - | 4 | 5 | 9 | Bloomfield, Co. Dublin. |
| - | 5 | 5 | - | - | - | - | - | - | - | - | - | - | - | - | - | 6 | 6 | Course Lodge, Co. Armagh. |
| - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | Elm Lawn, Co. Dublin. |
| - | 2 | 2 | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | 2 | Esker House, Co. Dublin. |
| 1 | 2 | 3 | 1 | 1 | 2 | - | - | - | 1 | 1 | 2 | - | - | - | 2 | 3 | 5 | Farnham House and Maryville, Co. Dublin. |
| 5 | - | 5 | - | - | - | - | - | - | - | - | - | - | - | - | 5 | - | 5 | Glenside, Co. Antrim. |
| 2 | - | 2 | 1 | - | 1 | - | - | - | 1 | - | 1 | - | - | - | 4 | - | 4 | Hampstead House, Co. Dublin. |
| 2 | - | 2 | 1 | - | 1 | - | - | - | 1 | - | 1 | - | - | - | 3 | - | 3 | Hartfield House, Co. Dublin. |
| - | 8 | 8 | - | 1 | 1 | - | - | - | - | 1 | 1 | - | - | - | - | 9 | 9 | Highfield House, Co. Dublin. |
| - | 2 | 2 | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | 2 | Lindville, Co. Cork. |
| - | 3 | 3 | - | - | - | - | - | - | - | - | - | - | - | - | - | 3 | 3 | Lisle House, Co. Dublin. |
| - | 1 | 1 | - | - | - | - | - | - | - | - | - | - | - | - | - | 1 | 1 | Rotbeg House, Dublin. |
| 15 | - | 15 | 8 | - | 8 | - | - | - | 8 | - | 8 | - | - | - | 23 | - | 23 | St. John of God, Co. Dublin. |
| 8 | - | 8 | 1 | - | 1 | - | - | - | 1 | - | 1 | - | - | - | 9 | - | 9 | St. Patrick's, Belmont Park, Co. Waterford. |
| 4 | 7 | 11 | 5 | 2 | 7 | - | - | - | 5 | 2 | 7 | - | - | - | 9 | 9 | 18 | St. Patrick's (Swift's), Dublin City. |
| - | 15 | 15 | - | 7 | 7 | - | - | - | - | 7 | 7 | - | - | - | - | 22 | 22 | St. Vincent's, Co. Dublin. |
| 8 | 15 | 23 | - | 4 | 4 | - | - | - | - | 4 | 4 | - | - | - | 9 | 19 | 28 | Stewart Institution, Co. Dublin. |
| - | 4 | 4 | - | - | - | - | - | - | - | - | - | - | - | - | - | 4 | 4 | Verville, Clontarf, Co. Dublin. |
| - | 1 | 1 | - | - | - | - | - | - | - | - | - | - | - | - | - | 1 | 1 | Woodbine Lodge, Co. Dublin. |
| 84 | 76 | 160 | 17 | 15 | 32 | - | - | - | 17 | 15 | 32 | - | - | - | 71 | 91 | 162 | Total. |

TABLE IV.—Showing the probable Causes of Insanity in the Patients remaining in Private Lunatic Asylums on 31st December, 1893.

| CAUSES. | Males. | Females. | Total. |
|--|--------|----------|--------|
| MORAL CAUSES:— | | | |
| Domestic trouble (including loss of relatives and friends), | — | 8 | 8 |
| Adverse circumstances (including business anxieties and pecuniary difficulties), | 4 | 5 | 9 |
| Mental anxiety and worry (not included under above two heads), and overwork, | 17 | 22 | 39 |
| Religious excitement, | 7 | 9 | 16 |
| Love affairs (including seduction), | 2 | 3 | 5 |
| Fright and nervous shock, | 7 | 9 | 16 |
| PHYSICAL CAUSES:— | | | |
| Intemperance in drink, | 25 | 12 | 37 |
| sexual, | — | — | — |
| Venereal disease, | 4 | — | 4 |
| Self-abuse (sexual), | 4 | — | 4 |
| Over-exertion, | 1 | — | 1 |
| Stroke, | 8 | 1 | 9 |
| Accident or injury, | 5 | — | 5 |
| Pregnancy, | — | — | — |
| Parturition and the puerperal state, | — | 1 | 1 |
| Lactation, | — | — | — |
| Uterine and Ovarian disorders, | — | 7 | 7 |
| Puberty, | — | 1 | 1 |
| Change of life, | — | 8 | 8 |
| Fevers, | 2 | 1 | 3 |
| Privation and starvation, | — | — | — |
| Old age, | 5 | 2 | 7 |
| Other bodily diseases or disorders, | 7 | 11 | 18 |
| Previous attacks, | 3 | 8 | 11 |
| Hereditary influences ascertained (direct and collateral), | 53 | 45 | 98 |
| Congenital defect ascertained, | 43 | 40 | 82 |
| Other ascertained causes, | 8 | 1 | 9 |
| UNKNOWN, | 82 | 167 | 249 |
| Total, | 281 | 361 | 642 |

TABLE V.—Showing the Forms of Mental Disorder in the Admissions, Recoveries, and Deaths, during the year 1893; and also in the cases Remaining in the Private Lunatic Asylums on the 31st December, 1893.

| Form of Mental Disorder. | | | Admissions. | | | Recoveries. | | | Deaths. | | | Remaining on 31st Dec., 1893. | | |
|-------------------------------------|--|--|-------------|----|-----|-------------|----|----|---------|----|----|-------------------------------|-----|-----|
| | | | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| Congenital or Infantile | { With Epilepsy, . | | 2 | 1 | 3 | — | — | — | — | — | — | 5 | 6 | 11 |
| | { Without Epilepsy, . | | 6 | 6 | 12 | — | — | — | — | — | — | 38 | 32 | 70 |
| Epilepsy required, . . . | | | 1 | — | 1 | 1 | — | 1 | 1 | — | 1 | 12 | 8 | 20 |
| General Paralysis, . . . | | | 3 | — | 3 | — | — | — | 3 | — | 3 | 6 | — | 6 |
| Mania. | { Acute, | | 16 | 13 | 29 | 6 | 6 | 12 | 1 | — | 1 | 15 | 13 | 28 |
| | { Chronic, | | 2 | 3 | 5 | 1 | — | 1 | 2 | 4 | 6 | 66 | 118 | 184 |
| | { Recurrent, | | 2 | 10 | 12 | — | 5 | 5 | — | 3 | 3 | 13 | 40 | 53 |
| | { <i>A Peto</i> , | | 2 | 4 | 6 | — | 3 | 3 | — | 1 | 1 | 3 | 6 | 9 |
| | { Puerperal, | | — | 1 | 1 | — | 1 | 1 | — | — | — | — | 1 | 1 |
| | { Senile, | | — | — | — | 1 | — | 1 | — | — | — | 2 | 3 | 5 |
| Melancholia. | { Acute, | | 10 | 18 | 28 | 10 | 13 | 23 | — | — | — | 1 | 21 | 22 |
| | { Chronic, | | 2 | 7 | 9 | 1 | 3 | 4 | — | 3 | 3 | 20 | 20 | 40 |
| | { With Stupor, | | 1 | — | 1 | — | 1 | 1 | — | — | — | 2 | 2 | 4 |
| | { Recurrent, | | 1 | 2 | 3 | 1 | 2 | 3 | — | — | — | 3 | 4 | 7 |
| | { Puerperal, | | — | 1 | 1 | — | 1 | 1 | — | — | — | — | — | — |
| | { Senile, | | — | — | — | — | — | — | — | — | — | — | 1 | 1 |
| Monomania | { Of Suspicion, Unseen | | 1 | 4 | 5 | 1 | 1 | 2 | 1 | — | 1 | 8 | 20 | 28 |
| | { Agency, &c. | | — | — | — | — | — | — | — | — | — | 2 | 2 | 4 |
| | { Of Pride, &c., | | — | — | — | — | — | — | — | — | — | — | — | — |
| Other forms of Delusional Insanity, | | | 7 | 6 | 13 | 2 | 3 | 5 | — | — | — | 9 | 16 | 25 |
| Dementia | { Primary, | | 15 | 3 | 18 | 3 | 1 | 4 | 2 | 1 | 3 | 29 | 17 | 46 |
| | { Secondary, | | 3 | 3 | 6 | — | — | — | 2 | 1 | 3 | 40 | 27 | 67 |
| | { Senile, | | 2 | — | 2 | — | — | — | 2 | 2 | 4 | 7 | 2 | 9 |
| | { Organic (i.e., from Tumour, Coarse Brain Disease, &c.) | | 1 | 1 | 2 | — | — | — | 3 | — | 3 | — | 2 | 2 |
| Total, | | | 77 | 83 | 160 | 27 | 40 | 67 | 17 | 15 | 32 | 281 | 361 | 642 |

TABLE VI.—Showing the Ages of Patients remaining in the Private Lunatic Asylums on 31st December, 1893.

| Ages. | Males. | Females. | Total. |
|--------------------------------|--------|----------|--------|
| Under 15 years, | 13 | 13 | 26 |
| From 15 to 20 years, | 13 | 11 | 24 |
| From 20 to 30 years, | 41 | 29 | 70 |
| From 30 to 40 years, | 34 | 41 | 75 |
| From 40 to 50 years, | 65 | 68 | 133 |
| From 50 to 60 years, | 67 | 101 | 168 |
| From 60 to 70 years, | 36 | 47 | 83 |
| From 70 to 80 years, | 19 | 46 | 65 |
| Over 80 years, | 3 | 5 | 8 |
| Total, | 281 | 361 | 642 |

TABLE VII.—Showing the Social Condition as to Marriage of Patients remaining in the Private Lunatic Asylums on 31st December, 1893.

| — | Males. | Females. | Total. |
|--------------------------------|--------|----------|--------|
| Married, | 33 | 31 | 64 |
| Single, | 223 | 280 | 503 |
| Widowers and Widows, | 19 | 50 | 69 |
| Unknown, | 1 | — | 1 |
| Total, | 281 | 361 | 642 |

TABLE VIII.—Showing the previous Professions or Occupations of the Patients remaining in Private Lunatic Asylums on 31st December, 1893.

| PREVIOUS PROFESSIONS OR OCCUPATIONS. | Males. | Females. | Total. |
|--------------------------------------|--------|----------|--------|
| Army, | 11 | — | 11 |
| Navy, | 2 | — | 2 |
| Church, | 30 | — | 30 |
| Law, | 3 | — | 3 |
| Medicine, | 13 | — | 13 |
| Students, | 7 | — | 7 |
| In Trade, | 47 | 5 | 52 |
| Farmers, | 22 | 1 | 23 |
| Other Occupations, | 41 | 20 | 61 |
| No Occupation, | 105 | 335 | 440 |
| Total, | 281 | 361 | 642 |

TABLE IX.—Giving the Names of the Proprietors or Superintendents of the Private Asylums.

| Asylums. | Where Situate. | Proprietor or Superintendent. |
|----------------------------|---|---|
| Allen Retreat, | Armagh, | Alexander D. Allen. |
| Broomfield, | Donnybrook, Co. Dub- lin. | Henry A. Lodge (Registrar). |
| Chase Lodge, . . . (L) | Rich Hill, Co. Armagh, . | James Orr. |
| Elm Lawn, . . . (L) | Dundrum, Co. Dublin, . | (Miss) Sarah Bernard. |
| Farnham House, . . (m) | } Finglas, Co. Dublin, . | Alexander Patton, M.B. |
| and Maryville, . . (L) | | |
| Gleniste, . . . (m) | Ballysillan, Belfast, . | Charles James Milligan, L.R.C.P. & S. ED. |
| Hampstead House, . . | Glasnevin, Co. Dublin, . | John Eustace, M.D. |
| Barthold House, . . (m) | Dramcondra, Co. Dub- lin. | Francis E. Lynch, L.R.C.P. & S.L. |
| Highfield House, . . (L) | Dramcondra, Co. Dub- lin. | John Eustace, M.D. |
| Lindville, | Blackrock Road, Cork, . | John Osborne. |
| Rathgar House, . . (L) | Busby Park Road, Tere- nure, Co. Dublin. | (Mrs.) Sarah Fry. |
| St. John of God, . . (m) | Stillorgan, Co. Dublin, . | Rev. E. Picard. |
| St. Patrick's (Belmont), . | Belmont Park, Water- ford. | Rev. W. J. Becker. |
| St. Patrick's (Swift's), . | Bow Lane, West, Dublin, . | John Melony, F.R.C.P. |
| St. Vincent's, . . . (L) | Parview, Co. Dublin, . | The Superiorem. |
| Stewart Institution, . . | Palmerstown, Co. Dub- lin. | Frederick Pim, L.R.C.P. & M.R.C.S. |
| Verville, (L) | Green Lanes, Clontarf, . | Francis E. Lynch, L.R.C.P. & S.L. |
| Woodlase Lodge, . . (L) | Rathfarnham, Co. Dub- lin. | (Mrs.) Mary Jane Bishop. |

(m.) For male patients only.

(L) For female patients only.

APPENDIX D.

LUNATIC WARDS OF WORKHOUSES.

TABLE showing the NUMBER of LUNATICS and IMBECILES

| UNIONS. | LUNATICS. | | | | | | | | |
|---------------------------|-------------------|-----|-----|----------------|----|----|--------|-----|-----|
| | Without Epilepsy. | | | With Epilepsy. | | | Total. | | |
| PROVINCE OF ULSTER. | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| Antrim, | . | 7 | 7 | 1 | 1 | 2 | 1 | 8 | 9 |
| Armagh, | 4 | 9 | 13 | . | 1 | 1 | 4 | 10 | 14 |
| Bailieborough, | 1 | . | 1 | . | . | . | 1 | . | 1 |
| Ballycastle, | 2 | 1 | 3 | . | . | . | 2 | 1 | 3 |
| Ballymena, | 64 | 50 | 114 | 5 | 5 | 10 | 69 | 54 | 123 |
| Ballymoney, | 3 | 1 | 2 | . | . | . | 1 | 1 | 2 |
| Ballyshannon, | 2 | 4 | 7 | . | . | . | 3 | 4 | 7 |
| Banbridge, | 7 | 14 | 21 | 2 | . | 2 | 9 | 14 | 23 |
| Bawnboy, | 1 | 3 | 4 | . | . | . | 1 | 3 | 4 |
| Belfast, | 144 | 222 | 366 | 30 | 23 | 53 | 174 | 245 | 419 |
| Carrickmacross, | . | 4 | 4 | . | . | . | . | 4 | 4 |
| Castleblayney, | 12 | 7 | 19 | 1 | 1 | 2 | 14 | 8 | 22 |
| Castlederg, | 1 | 1 | 2 | . | . | . | 1 | 1 | 2 |
| Cavan, | . | 5 | 5 | 1 | 1 | 2 | 1 | 6 | 7 |
| Clogher, | . | . | . | . | . | . | . | . | . |
| Clones, | . | 5 | 5 | . | . | . | . | 5 | 5 |
| Coleraine, | 3 | 4 | 7 | . | . | . | 3 | 4 | 7 |
| Cookstown, | 6 | 5 | 11 | . | 1 | 1 | 6 | 6 | 12 |
| Cootahill, | 2 | 9 | 12 | . | . | . | 2 | 9 | 12 |
| Demaght, | . | 2 | 2 | . | . | . | . | 2 | 2 |
| Downpatrick, | 4 | 9 | 13 | 2 | 1 | 3 | 6 | 10 | 16 |
| Dunfmlagh, | . | . | . | . | . | . | . | . | . |
| Dungannon, | 6 | 9 | 15 | 1 | . | 1 | 7 | 9 | 16 |
| Enniskillen, | 10 | 9 | 19 | . | 2 | 2 | 10 | 11 | 21 |
| Glenties, | . | 1 | 1 | . | . | . | . | 1 | 1 |
| Inishowen, | 8 | 5 | 13 | . | . | . | 8 | 5 | 13 |
| Irvinestown, | 2 | 1 | 3 | . | . | . | 2 | 1 | 3 |
| Kilkeel, | 1 | 1 | 2 | . | . | . | 1 | 1 | 2 |
| Larne, | 5 | 18 | 23 | 1 | . | 1 | 6 | 18 | 24 |
| Letterkenny, | . | . | . | . | . | . | . | . | . |
| Lisavady, | 2 | 8 | 10 | . | 1 | 1 | 2 | 9 | 11 |
| Lisburn, | 5 | 7 | 12 | . | . | . | 5 | 7 | 12 |
| Lisnaskea, | . | . | . | . | . | . | . | . | . |
| Londonderry, | . | . | . | . | . | . | . | . | . |
| Lurgan, | 8 | 5 | 13 | . | 3 | 3 | 6 | 8 | 14 |
| Magherafelt, | 4 | 8 | 12 | . | . | . | 4 | 8 | 12 |
| Millford, | 1 | . | 1 | . | . | . | 1 | . | 1 |
| Monaghan, | 5 | 8 | 13 | . | . | . | 5 | 8 | 13 |
| Newry, | 9 | 15 | 24 | 1 | 1 | 2 | 10 | 16 | 26 |
| Newtownards, | 23 | 36 | 59 | 1 | 3 | 4 | 24 | 39 | 63 |
| Omagh, | 2 | 8 | 10 | 2 | 2 | 4 | 4 | 10 | 14 |
| Strabane, | 9 | 1 | 10 | . | . | . | 9 | 1 | 10 |
| Stamnorlar, | . | 2 | 2 | . | . | . | . | 2 | 2 |
| Total, Ulster, | 354 | 511 | 865 | 49 | 40 | 89 | 403 | 557 | 960 |

in Union Workhouses on 31st December, 1893.

| IMBECILES. | | | | | | | | | Total Lunatics and Imbeciles. | | | UNIONS. |
|-------------------|-----|-----|----------------|----|----|--------|-----|-----|----------------------------------|-----|-------|------------------------|
| Without Epilepsy. | | | With Epilepsy. | | | Total. | | | | | | |
| M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | PROVINCE OF ULSTER. |
| 4 | 8 | 12 | 1 | 1 | 2 | 5 | 9 | 14 | 6 | 17 | 23 | Antrim. |
| 14 | 7 | 21 | 2 | 6 | 8 | 16 | 13 | 29 | 20 | 23 | 43 | Armagh. |
| 4 | 4 | 8 | . | . | . | . | 4 | 4 | 1 | 4 | 5 | Ballyborough. |
| 2 | 1 | 3 | 2 | 1 | 3 | 4 | 2 | 6 | 6 | 3 | 9 | Ballycastle. |
| 11 | 5 | 16 | . | 3 | 3 | 11 | 8 | 19 | 80 | 72 | 152 | Ballymena. |
| 1 | 1 | 2 | . | . | . | 1 | 1 | 2 | 2 | 2 | 4 | Ballymoney. |
| . | . | . | 2 | . | 2 | 2 | . | 2 | 5 | 4 | 9 | Ballyshannon. |
| 11 | 8 | 20 | 1 | 2 | 4 | 12 | 12 | 24 | 21 | 26 | 47 | Banbridge. |
| 4 | 2 | 6 | . | . | . | 4 | 2 | 6 | 5 | 5 | 10 | Bawnboy. |
| 21 | 22 | 44 | 6 | 2 | 8 | 27 | 26 | 53 | 211 | 271 | 482 | Belfast. |
| 1 | 1 | 2 | . | . | . | 1 | 1 | 2 | 1 | 8 | 9 | Carrikmacross. |
| 8 | 6 | 14 | 1 | . | 1 | 9 | 6 | 15 | 23 | 14 | 37 | Castleblayney. |
| 1 | 1 | 2 | . | . | . | 1 | 1 | 2 | 2 | 2 | 4 | Castlederg. |
| 8 | 5 | 13 | 2 | 3 | 5 | 10 | 8 | 18 | 11 | 14 | 25 | Cavan. |
| 8 | 5 | 13 | 1 | . | 1 | 9 | 5 | 14 | 9 | 5 | 14 | Clogher. |
| 1 | 2 | 3 | 1 | . | 1 | 2 | 2 | 4 | 2 | 7 | 9 | Clones. |
| 2 | 3 | 7 | . | 1 | 1 | 2 | 6 | 8 | 5 | 10 | 15 | Coleraine. |
| 3 | . | 3 | . | 1 | 1 | 2 | 1 | 4 | 9 | 7 | 16 | Cookstown. |
| 2 | 1 | 3 | . | . | . | 2 | 1 | 3 | 5 | 20 | 25 | Cooteshill. |
| 1 | 2 | 3 | . | 1 | 1 | 1 | 3 | 4 | 1 | 5 | 6 | Donegal. |
| 7 | 5 | 12 | . | . | . | 7 | 5 | 12 | 13 | 15 | 28 | Downpatrick. |
| . | . | . | . | . | . | . | . | . | . | . | . | Dunfmlagh. |
| 2 | 7 | 10 | 2 | 1 | 3 | 5 | 8 | 13 | 12 | 17 | 29 | Dungannon. |
| 3 | 5 | 8 | 1 | . | 1 | 4 | 5 | 9 | 14 | 15 | 29 | Euniskillen. |
| 1 | 2 | 3 | 1 | . | 1 | 2 | 2 | 4 | 2 | 3 | 5 | Glenties. |
| 2 | 1 | 3 | . | . | . | 2 | 1 | 3 | 10 | 6 | 16 | Inishowen. |
| . | 2 | 2 | . | . | . | . | 2 | 2 | 2 | 2 | 5 | Irvinestown. |
| 1 | . | 1 | . | . | . | 1 | . | 1 | 2 | 1 | 3 | Kilkeel. |
| . | 8 | 8 | 2 | . | 2 | 2 | 8 | 10 | 3 | 26 | 34 | Larne. |
| . | . | . | 1 | . | 1 | 1 | . | 1 | 1 | . | 1 | Letterkenny. |
| 6 | 7 | 13 | . | 2 | 2 | 6 | 9 | 15 | 3 | 18 | 26 | Lisnavea. |
| 4 | 6 | 10 | 1 | 5 | 6 | 5 | 11 | 16 | 10 | 18 | 28 | Lisburn. |
| 3 | 2 | 5 | . | . | . | 3 | 2 | 5 | 3 | 2 | 5 | Lisnakea. |
| 11 | 9 | 20 | 1 | . | 1 | 12 | 9 | 21 | 12 | 9 | 21 | Londonderry. |
| 6 | 8 | 14 | 2 | . | 2 | 8 | 8 | 16 | 14 | 16 | 30 | Lurgan. |
| 5 | 2 | 7 | 1 | 1 | 2 | 6 | 3 | 9 | 10 | 11 | 21 | Magherafelt. |
| 2 | 5 | 7 | . | . | . | 2 | 5 | 7 | 2 | 5 | 7 | Midford. |
| 1 | 3 | 4 | . | 2 | 2 | 3 | 5 | 8 | 6 | 13 | 19 | Monaghan. |
| 4 | 3 | 7 | 1 | 1 | 2 | 5 | 4 | 9 | 15 | 20 | 35 | Newry. |
| 1 | . | . | . | . | . | . | . | . | 24 | 20 | 44 | Newtownards. |
| 1 | 4 | 5 | . | . | . | 1 | 4 | 5 | 7 | 12 | 19 | Omagh. |
| 3 | 1 | 4 | . | 1 | 1 | 3 | 2 | 5 | 12 | 3 | 15 | Sirabane. |
| 2 | . | 2 | . | . | . | 2 | . | 2 | 2 | 2 | 4 | Siramore. |
| 180 | 168 | 348 | 27 | 30 | 57 | 212 | 204 | 416 | 615 | 761 | 1,376 | Total, Ulster. |

TABLE.—Showing the Number of Lunatics and Imbeciles in

| UNIONS. | LUNATICS. | | | | | | | | |
|----------------------------|-------------------|-----|-----|----------------|----|----|--------|-----|-----|
| | Without Epilepsy. | | | With Epilepsy. | | | Total. | | |
| PROVINCE OF MUNSTER. | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| Ballyvaughan, | 2 | 3 | 5 | . | . | . | 2 | 3 | 5 |
| Bandon, | 1 | 3 | 4 | . | 1 | 1 | 1 | 4 | 5 |
| Bantry, | 1 | 1 | 2 | . | . | . | 1 | 1 | 2 |
| Borrisokane, | . | . | . | . | . | . | . | . | . |
| Cahersiveen, | . | . | . | . | . | . | . | . | . |
| Carrick-on-Suir, | 2 | 2 | 4 | . | . | . | 2 | 2 | 4 |
| Cashel, | 1 | 2 | 3 | . | . | . | 1 | 2 | 3 |
| Castletown, | . | . | . | . | . | . | . | . | . |
| Clogheen, | 4 | 1 | 5 | . | . | . | 4 | 1 | 5 |
| Clonakilty, | 2 | 4 | 6 | . | . | . | 2 | 4 | 6 |
| Clounmel, | 7 | 3 | 10 | . | 5 | 3 | 7 | 6 | 13 |
| Cork, | 27 | 109 | 136 | 3 | 26 | 29 | 30 | 135 | 165 |
| Corrofin, | 1 | 3 | 4 | 1 | . | 1 | 2 | 3 | 5 |
| Croom, | 5 | 6 | 11 | . | . | . | 5 | 6 | 11 |
| Dingle, | . | 1 | 1 | . | . | . | . | 1 | 1 |
| Dungarvan, | 5 | 2 | 7 | 1 | 1 | 2 | 6 | 3 | 9 |
| Dunmanway, | 1 | 1 | 2 | . | . | . | 1 | 1 | 2 |
| Ennis, | 38 | 16 | 54 | 2 | . | 2 | 40 | 16 | 56 |
| Ennistymon, | 15 | 10 | 25 | 1 | . | 1 | 16 | 10 | 26 |
| Fermoy, | 1 | 9 | 10 | . | . | . | 1 | 9 | 10 |
| Kanturk, | . | . | . | . | . | . | . | . | . |
| Kenmare, | . | . | . | . | . | . | . | . | . |
| Killybegs, | . | 3 | 3 | 1 | . | 1 | 1 | 3 | 4 |
| Killarney, | 1 | 4 | 5 | . | . | . | 1 | 4 | 5 |
| Kilmacothomas, | . | 4 | 4 | 2 | 2 | 4 | 2 | 6 | 8 |
| Kilmallock, | 12 | 22 | 34 | 5 | 2 | 7 | 17 | 24 | 41 |
| Kilrush, | 15 | 11 | 26 | . | 5 | 5 | 15 | 16 | 31 |
| Kinsale, | 2 | 2 | 4 | . | . | . | 2 | 2 | 4 |
| Limerick, | 47 | 61 | 108 | 8 | 5 | 13 | 55 | 66 | 121 |
| Lismore, | 4 | 9 | 13 | 3 | 5 | 8 | 7 | 14 | 21 |
| Listowel, | 2 | 5 | 7 | . | 1 | 1 | 2 | 6 | 8 |
| Macroom, | 4 | 4 | 8 | . | . | . | 4 | 4 | 8 |
| Mallow, | 2 | 4 | 6 | 1 | . | 1 | 3 | 4 | 7 |
| Middleton, | . | . | . | . | . | . | . | . | . |
| Millstreet, | 4 | 5 | 9 | . | . | . | 4 | 5 | 9 |
| Mitchelstown, | 2 | 5 | 7 | . | 2 | 2 | 2 | 7 | 9 |
| Nenagh, | 2 | 8 | 10 | . | . | . | 2 | 8 | 10 |
| Newcastle, | 2 | 2 | 4 | . | . | . | 2 | 2 | 4 |
| Rathkeale, | 2 | 3 | 5 | . | 1 | 1 | 2 | 4 | 6 |
| Roosca, | . | 1 | 1 | . | . | . | . | 1 | 1 |
| Scariff, | 4 | 2 | 6 | . | . | . | 4 | 2 | 6 |
| Skibbereen, | . | . | . | . | . | . | . | . | . |
| Skull, | 1 | 1 | 2 | . | . | . | 1 | 1 | 2 |
| Thurles, | 1 | 2 | 3 | . | . | . | 1 | 2 | 3 |
| Tipperary, | 11 | 16 | 27 | 3 | 2 | 5 | 14 | 18 | 32 |
| Trillick, | 4 | 5 | 9 | . | . | . | 4 | 5 | 9 |
| Tulla, | 4 | 2 | 6 | 1 | . | 1 | 5 | 2 | 7 |
| Waterford, | 1 | 25 | 26 | . | 1 | 1 | 1 | 26 | 27 |
| Youghal, | 2 | 5 | 7 | . | . | . | 2 | 5 | 7 |
| Total, Munster, | 245 | 296 | 541 | 23 | 55 | 68 | 268 | 451 | 727 |

Union Workhouses, on 31st December, 1893.—continued.

| IMBECILES. | | | | | | | | | Total Lunatics and Imbeciles. | | | UNIONS. |
|-------------------|-----|-----|----------------|----|----|--------|-----|-----|-------------------------------|-----|-------|----------------------|
| Without Epilepsy. | | | With Epilepsy. | | | Total. | | | | | | |
| M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | PROVINCE OF MUNSTER. |
| 1 | 1 | 2 | . | . | . | 1 | 1 | 2 | 3 | 4 | 7 | Ballyvaghan. |
| 3 | 1 | 4 | . | . | . | 3 | 1 | 4 | 4 | 6 | 9 | Bandon. |
| 1 | 1 | 2 | . | . | . | 1 | 1 | 2 | 2 | 2 | 4 | Bantry. |
| . | 2 | 2 | . | . | . | . | 2 | 2 | . | 2 | 2 | Borrisokane. |
| 1 | 1 | 2 | . | . | . | 1 | 1 | 2 | 1 | 1 | 2 | Caherciveen. |
| 1 | 4 | 5 | 1 | 4 | 5 | 2 | 8 | 10 | 5 | 10 | 15 | Carriek-on-Suir. |
| 4 | 9 | 13 | . | 3 | 3 | 4 | 12 | 16 | 6 | 14 | 19 | Cashel. |
| 4 | 1 | 5 | . | . | . | 4 | 1 | 5 | 4 | 1 | 5 | Castletown. |
| 2 | 3 | 5 | . | 2 | 2 | 3 | 5 | 8 | 7 | 6 | 13 | Clogheen. |
| 1 | 2 | 3 | . | 2 | 2 | 1 | 4 | 5 | 3 | 8 | 11 | Clonsilla. |
| 3 | 6 | 9 | 1 | 1 | 2 | 4 | 7 | 11 | 11 | 13 | 24 | Clonmel. |
| 23 | 20 | 43 | 3 | . | 3 | 27 | 20 | 47 | 67 | 155 | 222 | Cork. |
| 1 | 1 | 2 | . | . | . | 1 | 1 | 2 | 3 | 4 | 7 | Cerrofin. |
| 8 | 5 | 13 | 1 | . | 1 | 9 | 5 | 14 | 14 | 11 | 25 | Croom. |
| . | 3 | 3 | . | . | . | . | 3 | 3 | . | 4 | 4 | Dingle. |
| 4 | 1 | 5 | 1 | 2 | 3 | 5 | 3 | 8 | 11 | 6 | 17 | Dungarvan. |
| 3 | 1 | 4 | 1 | 1 | 2 | 4 | 2 | 6 | 5 | 3 | 8 | Dunmaurway. |
| 16 | 17 | 33 | 1 | 2 | 3 | 17 | 19 | 36 | 38 | 35 | 73 | Ennis. |
| 7 | 13 | 20 | . | 3 | 3 | 7 | 16 | 23 | 25 | 26 | 49 | Ennistymon. |
| 7 | 5 | 12 | 2 | . | 2 | 9 | 5 | 14 | 10 | 14 | 24 | Fermoy. |
| 12 | 20 | 32 | 1 | 6 | 7 | 13 | 26 | 39 | 13 | 26 | 39 | Kanturk. |
| . | . | . | . | 1 | 1 | . | 1 | 1 | . | 1 | 1 | Kenmare. |
| 2 | 2 | 4 | 1 | . | 1 | 4 | 3 | 7 | 5 | 6 | 11 | Killybeg. |
| 6 | 2 | 8 | 1 | 1 | 2 | 7 | 4 | 11 | 8 | 8 | 16 | Killarney. |
| 1 | 3 | 4 | . | . | . | 1 | 3 | 4 | 3 | 2 | 5 | Kilmaethomas. |
| 3 | . | 3 | 2 | . | 2 | 5 | . | 5 | 23 | 24 | 47 | Kilmallock. |
| 2 | 6 | 8 | . | . | . | 2 | 6 | 8 | 18 | 23 | 40 | Kilrush. |
| . | . | . | . | . | . | . | . | . | 2 | 2 | 4 | Kinsale. |
| 8 | 3 | 11 | 4 | . | 4 | 12 | 3 | 15 | 67 | 37 | 104 | Limerick. |
| 1 | 2 | 3 | 1 | . | 1 | 2 | 2 | 4 | 9 | 17 | 26 | Lismore. |
| 2 | 4 | 6 | . | . | . | 2 | 4 | 6 | 4 | 10 | 14 | Lisdowney. |
| . | 5 | 5 | 2 | 2 | 4 | 3 | 9 | 12 | 7 | 13 | 20 | Macroom. |
| 4 | 16 | 20 | 3 | . | 3 | 7 | 16 | 23 | 10 | 26 | 36 | Mallow. |
| 11 | 14 | 25 | 3 | 1 | 4 | 14 | 15 | 29 | 14 | 15 | 29 | Middleton. |
| 6 | 1 | 7 | 1 | 1 | 2 | 7 | 2 | 9 | 11 | 7 | 18 | Millstreet. |
| 3 | 2 | 5 | . | . | . | 3 | 2 | 5 | 6 | 9 | 15 | Mitchelstown. |
| . | . | . | . | . | . | . | . | . | 3 | 6 | 9 | Nenagh. |
| 2 | 6 | 8 | 6 | . | 6 | 8 | 6 | 14 | 9 | 8 | 17 | Newcastle. |
| 5 | 3 | 8 | 1 | . | 1 | 6 | 3 | 9 | 8 | 9 | 17 | Rathkeale. |
| 3 | 6 | 9 | . | . | . | 3 | 6 | 9 | 3 | 7 | 10 | Roscrea. |
| . | 4 | 4 | 1 | . | 1 | 1 | 4 | 5 | 6 | 6 | 12 | Scariff. |
| 4 | 2 | 6 | 1 | 1 | 2 | 5 | 3 | 8 | 6 | 3 | 9 | Skibbereen. |
| . | . | . | . | . | . | . | . | . | 1 | 1 | 2 | Skull. |
| 3 | . | 3 | . | . | . | 3 | . | 3 | 4 | 2 | 6 | Thurles. |
| 2 | 6 | 8 | 2 | 2 | 4 | 4 | 9 | 13 | 18 | 27 | 45 | Tipperary. |
| 12 | 5 | 17 | . | . | . | 12 | 5 | 17 | 16 | 10 | 26 | Trillick. |
| 6 | 4 | 10 | 1 | . | 1 | 7 | 4 | 11 | 11 | 6 | 17 | Tulla. |
| 31 | 18 | 49 | 6 | 2 | 8 | 37 | 17 | 54 | 38 | 43 | 81 | Waterford. |
| 13 | 7 | 20 | 3 | . | 3 | 16 | 7 | 23 | 17 | 12 | 29 | Youghal. |
| 228 | 219 | 447 | 58 | 20 | 78 | 286 | 239 | 525 | 525 | 729 | 1,254 | Total, Munster. |

TABLE.—Showing the Number of Lunatics and Imbeciles in

| UNIONS. | LUNATICS. | | | | | | | | |
|----------------------------|-------------------|-----|-----|----------------|----|-----|--------|-----|-----|
| | Without Epilepsy. | | | With Epilepsy. | | | Total. | | |
| PROVINCE OF LEINSTER. | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| Abbeyfeix, | 3 | 2 | 5 | . | . | . | 3 | 2 | 5 |
| Ardee, | 2 | . | 2 | 1 | 1 | 2 | 3 | 1 | 4 |
| Athlone, | . | . | . | . | . | . | . | . | . |
| Athy, | . | . | . | . | . | . | . | . | . |
| Ballymahon, | . | . | . | . | . | . | . | . | . |
| Balrothery, | 4 | 7 | 11 | . | . | . | 4 | 7 | 11 |
| Ballinglass, | . | 2 | 2 | . | . | . | . | 2 | 2 |
| Callan, | 7 | 9 | 16 | 2 | 2 | 4 | 9 | 11 | 20 |
| Carlow, | 4 | 8 | 12 | 1 | . | 1 | 5 | 8 | 12 |
| Castlecumber, | 2 | 2 | 4 | . | . | . | 2 | 2 | 4 |
| Cellbridge, | 3 | 7 | 10 | . | 1 | 1 | 3 | 8 | 11 |
| Delvin, | 2 | 3 | 5 | 2 | . | 2 | 4 | 3 | 7 |
| Drogheda, | 21 | 10 | 31 | 2 | 4 | 6 | 23 | 14 | 37 |
| Dublin, North, | 23 | 61 | 84 | 11 | 18 | 29 | 34 | 79 | 113 |
| Dublin, South, | 30 | 78 | 108 | 15 | 7 | 22 | 45 | 85 | 130 |
| Dundalk, | 8 | 14 | 22 | . | 5 | 5 | 8 | 19 | 27 |
| Dunshaughlin, | 1 | 4 | 5 | . | 1 | 1 | 1 | 5 | 6 |
| Edenderry, | . | . | . | . | . | . | . | . | . |
| Enniscorthy, | 7 | 10 | 17 | . | . | . | 7 | 10 | 17 |
| Gorey, | 2 | 5 | 7 | . | . | . | 2 | 5 | 7 |
| Granard, | . | . | . | . | . | . | . | . | . |
| Kells, | 3 | 9 | 12 | . | . | . | 3 | 9 | 12 |
| Kilkenney, | 13 | 17 | 30 | . | 2 | 2 | 13 | 19 | 32 |
| Longford, | 1 | 1 | 2 | 2 | 3 | 5 | 3 | 4 | 7 |
| Mountmellick, | 2 | 8 | 10 | . | 2 | 2 | 2 | 10 | 12 |
| Mullingar, | . | 2 | 2 | . | . | . | . | 2 | 2 |
| Nass, | 1 | 6 | 7 | 1 | 1 | 2 | 2 | 7 | 9 |
| Navan, | 4 | 4 | 8 | . | . | . | 4 | 4 | 8 |
| New Ross, | 4 | 12 | 17 | 2 | 3 | 5 | 6 | 15 | 21 |
| Oldcastle, | 1 | 6 | 7 | . | . | . | 1 | 6 | 7 |
| Parsonstown, | 5 | 3 | 8 | . | 1 | 1 | 5 | 4 | 9 |
| Rathdown, | 20 | 29 | 49 | 2 | 2 | 4 | 22 | 31 | 53 |
| Rathfrum, | 7 | 17 | 24 | 1 | 2 | 3 | 8 | 19 | 27 |
| Shillelagh, | . | . | . | 1 | . | 1 | 1 | . | 1 |
| Thomastown, | 3 | 3 | 6 | . | . | . | 3 | 3 | 6 |
| Trim, | 4 | 5 | 9 | . | 2 | 2 | 4 | 7 | 11 |
| Tullamore, | 11 | 22 | 33 | . | 3 | 3 | 11 | 25 | 36 |
| Ulingford, | . | 2 | 2 | . | . | . | . | 2 | 2 |
| Wexford, | . | . | . | . | . | . | . | . | . |
| Total, Leinster, | 198 | 359 | 557 | 44 | 61 | 105 | 242 | 420 | 672 |

Union Workhouses, on 31st December, 1893—continued.

| IMBECILES. | | | | | | | | | Total Lunatics and Imbeciles. | | | UNIONS. |
|-------------------|-----|-----|----------------|----|----|--------|-----|-----|-------------------------------|-----|-------|-----------------------|
| Without Epilepsy. | | | With Epilepsy. | | | Total. | | | | | | |
| M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | PROVINCE OF LEINSTER. |
| 4 | 6 | 10 | 1 | 2 | 3 | 5 | 8 | 13 | 6 | 10 | 16 | Abbeyleix. |
| 4 | 13 | 17 | 2 | 1 | 3 | 6 | 14 | 20 | 2 | 15 | 17 | Ardee. |
| 7 | 6 | 13 | | 1 | 1 | 7 | 7 | 14 | 7 | 7 | 14 | Athlone. |
| 4 | 1 | 5 | 1 | 1 | 2 | 5 | 2 | 7 | 2 | 2 | 4 | Athy. |
| | 2 | 2 | | | | | 2 | 2 | | 2 | 2 | Ballymahon. |
| 1 | 2 | 3 | | 1 | 1 | 1 | 3 | 4 | 5 | 10 | 15 | Balrothery. |
| 2 | 6 | 8 | 2 | 3 | 5 | 4 | 8 | 12 | 4 | 10 | 14 | Ballinglough. |
| 2 | 2 | 4 | | | | 2 | 2 | 4 | 11 | 13 | 24 | Cullin. |
| 12 | 5 | 17 | 2 | 7 | 9 | 14 | 12 | 26 | 20 | 20 | 40 | Carlow. |
| 5 | | 5 | | | | 5 | | 5 | 5 | 2 | 7 | Castlecomer. |
| 1 | | 1 | 1 | | 1 | 2 | | 2 | 5 | 6 | 11 | Celbridge. |
| | 2 | 2 | 1 | | 1 | 1 | 2 | 3 | 5 | 5 | 10 | Delvin. |
| 7 | | 7 | 4 | | 4 | 11 | | 11 | 34 | 14 | 48 | Drogheda. |
| 2 | 2 | 4 | 2 | 2 | 4 | 4 | 4 | 8 | 20 | 64 | 84 | Dublin, North. |
| 19 | 16 | 35 | 7 | | 7 | 26 | 16 | 42 | 71 | 101 | 172 | Dublin, South. |
| 4 | 2 | 6 | 1 | 4 | 5 | 5 | 7 | 12 | 16 | 26 | 41 | Dundalk. |
| 1 | 2 | 3 | 1 | | 1 | 2 | 2 | 4 | 3 | 7 | 10 | Dunshaughlin. |
| 4 | 2 | 6 | | 1 | 1 | 4 | 4 | 8 | 4 | 4 | 8 | Edenderry. |
| 20 | 12 | 32 | 2 | 2 | 4 | 12 | 14 | 26 | 19 | 24 | 43 | Enniscorthy. |
| 5 | 2 | 7 | 2 | | 2 | 7 | 2 | 9 | 9 | 6 | 15 | Gorey. |
| 4 | 4 | 8 | | 1 | 1 | 4 | 5 | 9 | 4 | 5 | 9 | Granard. |
| 4 | 10 | 14 | | | | 4 | 10 | 14 | 9 | 19 | 28 | Kells. |
| 4 | 16 | 20 | | 2 | 2 | 4 | 18 | 22 | 17 | 37 | 54 | Kilkenny. |
| | 1 | 1 | 1 | 2 | 3 | 1 | 3 | 4 | 4 | 7 | 11 | Longford. |
| 2 | 2 | 4 | 1 | | 1 | 4 | 2 | 6 | 6 | 12 | 18 | Mountmellick. |
| 4 | 7 | 11 | | | | 4 | 7 | 11 | 4 | 9 | 13 | Mullingar. |
| 6 | 11 | 17 | | 4 | 4 | 6 | 15 | 21 | 8 | 23 | 31 | Naa. |
| 6 | 11 | 17 | 2 | 1 | 3 | 10 | 12 | 22 | 14 | 16 | 30 | Navan. |
| 16 | 6 | 22 | 2 | 3 | 5 | 18 | 9 | 27 | 24 | 25 | 49 | New Ross. |
| 6 | 5 | 11 | 2 | 1 | 3 | 8 | 6 | 14 | 9 | 12 | 21 | Oldcastle. |
| 6 | 5 | 11 | | | | 6 | 5 | 11 | 11 | 9 | 20 | Parsonstown. |
| 10 | 9 | 19 | 1 | | 1 | 11 | 9 | 20 | 24 | 40 | 64 | Rathdown. |
| 1 | 5 | 6 | 1 | | 1 | 2 | 5 | 7 | 10 | 24 | 34 | Rathfriland. |
| 1 | 11 | 12 | | | | 1 | 11 | 12 | 2 | 11 | 13 | Shillelough. |
| 2 | 1 | 3 | 1 | 1 | 2 | 3 | 2 | 5 | 7 | 5 | 12 | Thomastown. |
| 6 | 11 | 17 | | 1 | 1 | 6 | 12 | 18 | 10 | 20 | 30 | Trim. |
| 6 | 4 | 10 | 1 | 1 | 2 | 7 | 7 | 14 | 18 | 22 | 40 | Tullamore. |
| 1 | | 1 | | | | 1 | | 1 | 1 | 2 | 3 | Uxlingford. |
| 11 | 12 | 23 | | 5 | 5 | 11 | 17 | 28 | 11 | 17 | 28 | Wexford. |
| 196 | 218 | 414 | 41 | 48 | 89 | 237 | 266 | 503 | 481 | 626 | 1,107 | Total, Leinster. |

TABLE showing the Number of Lunatics and Imbeciles

| UNIONS. | LUNATICS. | | | | | | | | |
|-------------------------------|-------------------|----|----|----------------|----|----|--------|----|-----|
| | Without Epilepsy. | | | With Epilepsy. | | | Total. | | |
| PROVINCE OF CONNAUGHT. | M. | F. | T. | M. | F. | T. | M. | F. | T. |
| Bellina, | 1 | 3 | 4 | . | . | . | 1 | 3 | 4 |
| Ballinasloe, | 2 | . | 2 | . | . | . | 2 | . | 2 |
| Ballinrobe, | . | . | . | . | . | . | . | . | . |
| Belmullet, | . | . | . | . | . | . | . | . | . |
| Boyle, | 2 | 10 | 12 | . | . | . | 2 | 10 | 12 |
| Carrick-on-Shannon, | 1 | 3 | 4 | . | . | . | 1 | 3 | 4 |
| Castlebar, | . | . | . | . | . | . | . | . | . |
| Castlerea, | 3 | 4 | 7 | . | . | . | 3 | 4 | 7 |
| Claremorris, | . | 4 | 4 | 1 | . | 1 | 1 | 4 | 5 |
| Clifden, | . | . | . | . | . | . | . | . | . |
| Dromore West, | . | . | . | . | . | . | . | . | . |
| Galway, | 1 | 3 | 4 | 1 | . | 1 | 2 | 3 | 7 |
| Gleamaddy, | 2 | 1 | 3 | 1 | . | 1 | 3 | 1 | 4 |
| Gort, | . | . | . | 1 | . | 1 | 1 | . | 1 |
| Killala, | 1 | 2 | 3 | 1 | . | 1 | 2 | 2 | 4 |
| Loughrea, | . | 1 | 1 | . | . | . | . | 1 | 1 |
| Manorhamilton, | 2 | 2 | 4 | . | . | . | 2 | 2 | 4 |
| Mohill, | . | . | . | . | . | . | . | . | . |
| Mount Bellew, | . | . | . | . | . | . | . | . | . |
| Oughterard, | 4 | 3 | 7 | . | . | . | 4 | 3 | 7 |
| Portlanna, | 1 | 2 | 3 | . | 2 | 2 | 1 | 4 | 7 |
| Roscommon, | 6 | 7 | 13 | . | 1 | 1 | 6 | 8 | 14 |
| Sligo, | 3 | 4 | 7 | . | . | . | 3 | 4 | 7 |
| Strokestown, | 2 | 2 | 4 | . | . | . | 2 | 2 | 4 |
| Swinsford, | 1 | 4 | 5 | . | 1 | 1 | 1 | 5 | 6 |
| Toberanary, | 1 | 2 | 3 | . | . | . | 1 | 2 | 3 |
| Tuam, | 2 | . | 2 | . | . | . | 2 | . | 2 |
| Westport, | . | . | . | . | . | . | . | . | . |
| Total, Connaught, | 56 | 61 | 97 | 6 | 5 | 10 | 41 | 66 | 107 |

| SUMMARY OF | | | | | | | | | |
|---------------------------|-----|-------|-------|-----|-----|-----|-----|-------|-------|
| ULSTER, | 354 | 611 | 865 | 49 | 46 | 95 | 403 | 657 | 860 |
| MUNSTER, | 243 | 390 | 639 | 33 | 55 | 88 | 276 | 461 | 737 |
| LEINSTER, | 198 | 269 | 567 | 44 | 61 | 105 | 242 | 439 | 613 |
| CONNAUGHT, | 56 | 61 | 97 | 6 | 5 | 10 | 41 | 66 | 107 |
| TOTAL, IRELAND, | 851 | 1,327 | 2,168 | 131 | 167 | 298 | 962 | 1,563 | 2,417 |

in Union Workhouses on 31st December, 1893.—continued.

| IMBECILES. | | | | | | | | | Total Lunatics and Imbeciles. | | | UNIONS. |
|-------------------|-----|-----|----------------|----|----|--------|-----|-----|----------------------------------|-----|-----|---------------------------|
| Without Epilepsy. | | | With Epilepsy. | | | Total. | | | | | | |
| M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | PROVINCE OF CONNAUGHT. |
| 2 | 4 | 9 | 8 | 1 | 6 | 6 | 7 | 15 | 9 | 10 | 19 | Ballina. |
| 2 | 2 | 4 | . | . | . | 2 | 2 | 4 | 4 | 2 | 6 | Ballinasloe. |
| 2 | . | 2 | . | . | . | 2 | . | 2 | 2 | . | 2 | Ballinrobe. |
| 2 | 1 | 3 | . | . | . | 2 | 1 | 3 | 2 | 1 | 3 | Belmullet. |
| 7 | 9 | 16 | 1 | 1 | 2 | 8 | 10 | 18 | 10 | 20 | 20 | Boyle. |
| . | . | . | . | . | . | . | . | . | 1 | 3 | 4 | Carriek-on-Shannon. |
| 4 | 2 | 6 | 1 | 1 | 2 | 5 | 3 | 6 | 5 | 3 | 8 | Castlebar. |
| 10 | 4 | 16 | . | . | . | 10 | 6 | 16 | 12 | 10 | 22 | Castlerea. |
| . | 6 | 6 | . | . | . | . | 6 | 6 | 1 | 10 | 11 | Claremorris |
| 2 | 1 | 4 | . | 1 | 1 | 3 | 2 | 5 | 3 | 2 | 5 | Clifden. |
| 1 | 1 | 2 | . | . | . | 1 | 1 | 2 | 1 | 1 | 2 | Dromore West. |
| 1 | 2 | 3 | . | . | . | 1 | 2 | 3 | 3 | 7 | 10 | Galway. |
| 1 | 2 | 4 | . | 2 | 2 | 1 | 5 | 6 | 4 | 0 | 10 | Glennamaddy. |
| 2 | . | 2 | . | . | . | 2 | . | 2 | 3 | . | 3 | Gort. |
| . | 1 | 1 | . | 1 | 1 | . | 2 | 2 | 2 | 4 | 6 | Killala. |
| 2 | 6 | 8 | . | 1 | 1 | 2 | 7 | 9 | 2 | 6 | 10 | Loughrea. |
| 5 | 5 | 10 | . | . | . | 5 | 5 | 10 | 7 | 7 | 14 | Manorhamilton. |
| 4 | . | 4 | 1 | . | 1 | 5 | . | 5 | 5 | . | 5 | Mohill. |
| 1 | 2 | 3 | 2 | 2 | 4 | 3 | 10 | 13 | 3 | 10 | 13 | Mount Bellew. |
| . | 1 | 1 | . | . | . | . | 1 | 1 | 4 | 4 | 8 | Oughterard. |
| . | 1 | 1 | . | . | . | . | 1 | 1 | 1 | 7 | 8 | Portlanna. |
| 6 | 7 | 12 | . | 3 | 3 | 6 | 10 | 16 | 12 | 16 | 20 | Rosemounton. |
| 5 | 6 | 14 | . | 1 | 1 | 6 | 7 | 13 | 11 | 11 | 22 | Sligo. |
| 5 | 3 | 12 | . | 1 | 1 | 5 | 2 | 14 | 6 | 12 | 20 | Strakestown. |
| 6 | 10 | 16 | . | 2 | 2 | 6 | 12 | 18 | 7 | 17 | 24 | Swinsford. |
| 5 | 3 | 12 | 1 | 2 | 3 | 6 | 10 | 16 | 7 | 12 | 19 | Tobercurry. |
| 1 | 4 | 5 | . | . | . | 1 | 4 | 5 | 3 | 4 | 7 | Tuam. |
| 2 | 2 | 4 | . | . | . | 2 | 2 | 4 | 2 | 2 | 4 | Westport. |
| 84 | 107 | 191 | 11 | 12 | 20 | 95 | 126 | 221 | 126 | 192 | 328 | Total, Connaught. |

PROVINCES.

| | | | | | | | | | | | | |
|-----|-----|-------|-----|-----|-----|-----|-----|-------|-------|-------|-------|-----------------|
| 180 | 159 | 348 | 22 | 26 | 68 | 212 | 204 | 416 | 615 | 761 | 1,376 | ULSTER. |
| 228 | 249 | 477 | 28 | 29 | 97 | 266 | 263 | 574 | 562 | 730 | 1,301 | MUNSTER. |
| 128 | 219 | 416 | 41 | 48 | 69 | 229 | 200 | 405 | 481 | 686 | 1,177 | LEINSTER. |
| 84 | 107 | 181 | 11 | 12 | 20 | 95 | 126 | 221 | 126 | 192 | 328 | CONNAUGHT. |
| 600 | 742 | 1,432 | 142 | 142 | 284 | 612 | 594 | 1,216 | 1,794 | 2,389 | 4,382 | TOTAL, IRELAND. |

APPENDIX E.

GAOLS AND CONVICT PRISONS.

TABLE I.—Showing the Number and Disposal of Lunatics who were confined in Gaols and Convict Prisons during the Year ended 31st December, 1893.

| Classification of Lunatics. | Number Remaining in Custody on 31st December, 1892. | | | Number Committed and became insane during the Year ended 31st December, 1893. | | | Total Number in Custody during the Year 1893. | | | Removed, Discharged, and Died. | | | | | | | | | | Total Removed, Discharged, or Died during the Year. | Remaining in Gaols on 31st December, 1893. | | | | | |
|---|---|----|----|---|----|----|---|----|----|--|----|----|----|----|---|------------------------------|---|-------|----|---|--|----|----|----|----|---|
| | | | | | | | | | | Removed to the Central Asylum by order of the Lord Lieutenant. | | | | | Discharged by order of the Lord Lieutenant. | Otherwise removed from Gaol. | | Died. | | | | | | | | |
| | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | T. | M. | F. | | | | | T. | | | M. | F. | T. | | |
| Persons acquitted of offences on the ground of insanity. | - | - | - | - | 4 | 1 | 4 | 1 | 3 | - | - | - | - | - | - | - | - | - | - | - | - | - | 4 | - | - | |
| Persons found insane on arraignment, and incapable of pleading. | - | - | - | - | 19 | 7 | 26 | 7 | 3 | 10 | 12 | 3 | 15 | - | 1 | 1 | - | - | - | - | - | - | 19 | 7 | 26 | - |
| Persons under sentence of imprisonment or transportation, who became insane in gaol. | - | - | - | - | 29 | 21 | 50 | 29 | 21 | 10 | 37 | 7 | 5 | 12 | - | - | - | - | - | - | - | 1 | 29 | 21 | 50 | - |
| Persons committed in default of surety to keep the peace, who were insane on, or who became insane subsequent to, commitment. | - | - | - | - | 7 | 3 | 10 | 7 | 3 | 10 | - | - | - | - | - | - | - | - | - | - | - | - | 7 | 3 | 10 | - |
| Persons committed under the Vagrancy Act, who were insane on, or who became insane subsequent to, commitment. | - | - | - | - | - | 8 | 1 | 9 | 8 | 1 | 9 | - | - | - | - | - | - | - | - | - | - | - | 8 | 1 | 9 | - |
| Total. | - | - | - | - | 67 | 32 | 99 | 67 | 32 | 99 | 44 | 23 | 67 | 22 | 8 | 30 | - | 1 | 1 | - | - | 1 | 67 | 32 | 99 | - |

TABLE II.—Showing the Number and Disposal of Persons confined in Convict Prisons who were or became insane during the year ended 31st December, 1893.

| | Convicts. | | |
|---|-----------|---------|--------|
| | Male. | Female. | Total. |
| Remaining in custody on 31st December, 1892, . . . | - | - | - |
| Became insane during the year ended 31st December, 1893, | 4 | 3 | 7 |
| Total number in custody during the Year, | 4 | 3 | 7 |
| Removed, Discharged, Died: | | | |
| Removed to Dundrum Asylum by warrant of Lord Lieutenant, | 4 | 3 | 7 |
| Discharged by order of Lord Lieutenant, or on expiration of sentence, | - | - | - |
| Otherwise removed from Prisons, | - | - | - |
| Died, | - | - | - |
| Total Removed, Discharged, and Died, | 4 | 3 | 7 |
| Remaining in Prisons on 31st December, 1893, . . . | - | - | - |

APPENDIX F.

MEMORANDA OF INSPECTIONS.

ARMAGH
ASYLUM.Inspected on
27th Dec.,
1893.

ARMAGH DISTRICT ASYLUM.

I inspected, on the 27th December, 1893, the Armagh District Asylum, and saw all the patients then resident.

The following table shows the changes in the asylum population since last inspection :—

| | Male. | Female. | Total. |
|-------------------------------------|-------|---------|--------|
| On register 30th December, 1892, | 174 | 185 | 359 |
| Admitted since, | 48 | 55 | 103 |
| | 220 | 240 | 460 |
| Discharged recovered, | 19 | 24 | 43 |
| Discharged unrecovered, | 6 | — | 6 |
| Escaped, | 1 | — | 1 |
| Died, | 14 | 11 | 25 |
| On register at this date, | 180 | 205 | 385 |
| Absent on pass, | 2 | — | 2 |
| Resident at this date, | 178 | 205 | 383 |

It is pleasant to note that last year's first admissions show a perceptible decrease as compared with those of recent years.

The condition of the patients needing special attention was, on the date of my visit, as follows :—

| | Male. | Female. | Total. |
|--------------------------------|-------|---------|--------|
| In bed, | 4 | 1 | 5 |
| In seclusion, | — | — | — |
| In restraint, | — | — | — |
| Wet last night, | 3 | 1 | 4 |
| Raised by attendant, | 8 | 6 | 14 |

Absence of
Restraint.

It is very satisfactory to be able to state that injudicious attempts to control excitement by restrictive means do not form any part of the system of treatment adopted in the Armagh Asylum. It has not been found necessary to mechanically restrain any patient during the twelve months under review, while only 13 entries appeared in the register of seclusion. Patients when excited are isolated, or separated from the surroundings which tend to anger them, while work affords a healthy and harmless channel to the excitement of many.

Accident.

The only accident recorded was an injury to a patient's finger, necessitating removal of the top of the finger.

Deaths.

The deaths, 25 in number, resulted in four cases from consumption, and in four from other forms of lung disease, in two cases from heart disease, in ten cases they resulted from brain or spinal diseases, in one from erysipelas, and in four from senile decay.

The causes of death were determined by post mortem examination in every case—eight in all—in which such examination was permissible.

ARMAGH
ASYLUM.

The average age of the men at death was 43·6, and of the women 45·8. No death resulted from accident or suicide during the year under review.

The following table of employment shows that 273 patients were employed out of the 383 resident :—

| | Male. | Female. |
|--|-------|---------|
| Assisting attendants in the wards, | 20 | 24 |
| As garden or field labourers, | 39 | - |
| As farm servants, | 19 | - |
| As cooks, | - | 1 |
| As messengers, | 1 | - |
| As stokers, | 2 | - |
| As shoemakers, | 5 | - |
| As upholsterers, | 1 | 4 |
| As painters, | 3 | - |
| In the kitchen, | 6 | - |
| In the laundry, | - | 24 |
| In officers' quarters, | - | 3 |
| At needlework, | - | 75 |
| At knitting, | - | 40 |
| | 102 | 171 |

These figures are fairly satisfactory; but if an increased amount of land were available for the patients' occupation and amusement, it ought to be possible to employ a larger proportion of the patients in garden and field labour. It is well known that those employments are best for the insane which keep them employed in the open air, as all garden and field labour, and, as a distinguished authority on mental disease pointed out many years ago, they proved not only of great advantage to the lower ranks who have been accustomed to daily toil, but even to the educated classes, owing to the peaceful and soothing influences of immediate intercourse with nature. I would urge the Governors, who have shown such an intelligent and liberal interest in the insane poor of the district, to consider the necessity which exists for the acquisition of additional land, and which, instead of being an additional burthen to the rate-payers, ought to become a source of profit.

Various structural alterations and additions have been completed since last visit. The patients' dining hall has been re-constructed, and a dining room provided for the attendants. The stores have been enlarged and re-arranged, the kitchen has been re-built and fitted with modern culinary appliances. The laundry has been extended by further building, and improved machinery provided in it. A mortuary of the most advanced kind has been erected, and all the lavatories and sanitary arrangements have been re-constructed and modernised.

ARMAGH ASYLUM. Sanction has been given for the erection of a detached hospital to accommodate 140 patients. This will meet the overcrowding which exists, and will render the asylum one of the most advanced, and let it be hoped, successful institutions in Ireland for the treatment of recent and acute cases.

Detached hospital to be built.

General condition.

I am glad to be able to state that cleanliness and good order were found in all parts of the establishment, and it is impossible to go through the asylum without being impressed with Dr. Graham's zealous interest in the working of the asylum, and the practical ability of his administration. The patients' food is good, the use of stimulants has been practically discontinued without any consequent ill-result, while narcotics or sedatives are but little used; healthy exercise during the day, and a genial temperature at night, are relied upon for producing sound and refreshing sleep. The heating of the divisions, a point, in my opinion, of the greatest importance in the treatment of the insane, is particularly satisfactory; the indoor temperature, even in cold weather, being maintained at or above sixty degrees Fah. I had occasion to notice that the sheets and pillow cases on a few beds on the male side were not as scrupulously clean as they should be, while No. 8 Division dormitory (with eleven beds) will require to be better ventilated and refloored as soon as the provision of the new accommodation will permit of its temporary disuse.

Books.

Divine service.

I examined the asylum books. On the Sunday preceding my visit, ninety-eight men and seventy women attended the Roman Catholic, sixty-eight men and sixty-three women the Presbyterian, and sixty six men and fifty-eight women the Church of England Divine Service

December, 1893.

BALLINASLOE ASYLUM.

Inspected on 3rd April, 1893.

BALLINASLOE DISTRICT ASYLUM.

This asylum was visited in October, 1892, and again on the 3rd April, 1893. The following Table shows the changes which have taken place in the asylum population since the date of last inspection:—

| | Males. | Females. | Total. |
|--|--------|----------|--------|
| On register 3rd October, 1892, | 462 | 330 | 792 |
| Admitted since, | 43 | 23 | 71 |
| | 510 | 353 | 863 |
| Discharged recovered, | 17 | 22 | 39 |
| Discharged unrecovered, | 4 | 1 | 5 |
| Died, | 22 | 15 | 37 |
| Resident on this date, | 467 | 315 | 782 |

Recent rapid increase.

The rapid increase of late years in the number of patients is remarkable. So great is it that this asylum is now the third largest in the country, while, unfortunately, the number of the insane in workhouses, or

scattered all large throughout the district, exhibits no corresponding decrease. This is exemplified by the following Table compiled from the last Census returns:—

BALLINASLOE
ASYLUM.

| | POPULATION. | | LUNATICS AND IDIOTS. | | | |
|----------------|-------------|---------|----------------------|----------------|------------|----------------|
| | | | 1881. | | 1891. | |
| | 1881. | 1891. | In Asylum. | Not in Asylum. | In Asylum. | Not in Asylum. |
| Galway, . . . | 242,605 | 214,712 | — | 337 | — | 316 |
| Rescommen, . . | 132,400 | 114,397 | 469 | 259 | 742 | 235 |
| Total, . . . | 374,005 | 329,109 | 469 | 596 | 742 | 551 |

During the decade the population of the District has diminished by 12 per cent., whereas the total number of Lunatics and Idiots has increased 21 per cent.

Various explanations have been given of the increase of insanity in Ireland, while many authorities would insist that it is more apparent than real. The excessive use of alcohol, want, and privation, no doubt account partly, in a district such as Ballinasloe, for the increase which has taken place, but undoubtedly its main causes are intermarriage and heredity. The hereditary tendency which passes from parent to offspring we must expect to increase rather than diminish in these days when so many patients leave our asylums cured of the disease, but not of the taint of mental weakness or instability. Many of these afterwards often marry, or are given in marriage, without any thought of the probable consequences. This hereditary tendency is increased and accentuated by intermarriages, which are most likely to take place in remote and secluded places, cut off from free communication with the rest of the country.

Causes of
increase.

One hundred and five deaths occurred from the 3rd March, 1891, to October, 1892, and thirty-seven from October to April, 1893. The causes of death were as follows:—

Deaths.

| | |
|-------------------------------------|----|
| Paralysis . . . | 1 |
| Apoplexy, . . . | 1 |
| Epilepsy, . . . | 15 |
| Maniacal exhaustion, . . . | 21 |
| Other diseases of the brain, . . . | 8 |
| Phtisis, and general wasting, . . . | 32 |
| Pneumonia and bronchitis, . . . | 6 |
| Hæmoptysis, . . . | 1 |
| Syncope, and heart disease . . . | 9 |
| Renal anasarca, . . . | 1 |
| Dysentery and diarrhoea, . . . | 11 |
| Internal obstruction, . . . | 3 |
| Strumous abscess, . . . | 3 |
| Diffuse cellulitis, . . . | 1 |
| Pernicious anæmia . . . | 1 |
| Senile decay and debility, . . . | 24 |
| Fever, . . . | 3 |
| Suicide, . . . | 1 |

BALLINASLOE

ASYLUM.

Accidents.

There are twelve entries in the register of accidents.

One patient (W. H.), who had escaped, was drowned on the 11th June, 1891, while trying to swim the river Suck. It is uncertain whether at the time he was influenced by any suicidal impulse, or simply intended to cross the river. P. H., a patient who had assisted in the kitchen for many years, and had never exhibited suicidal tendency, hung himself on the 10th March, 1893, from a rafter in the cement house close to the kitchen. An inquest was held, and the asylum officials were exonerated from all blame. The other deaths call for no special comment, except those, eight in number, resulting from dysentery, a disease which occasionally occurs in an epidemic form in this as in some of our other Irish asylums; one of these outbreaks took place last autumn. This disease, which seems to be specially favoured by overcrowding, is almost always connected with a defective drainage system, or a polluted water supply; and should further cases occur it will be necessary for the Governors to institute a thorough inquiry into the impurity in the water, or any defect in the asylum drainage.

Asylum
drainage.General
condition.

I am glad to be able to report that on the occasion of my visit I found the various sections of the institution clean and orderly. The new dining-room for the male patients has been completed since last inspection. It must be a matter of regret that it was not found possible to build a hall sufficiently large to accommodate both sexes, as has been done with advantage in many of our asylums. Nothing breaks the monotony of an asylum day better than bringing the patients together at meals, and nothing tends more to quiet and decorum than the example which the tranquil and orderly patients show those who are excitable or refractory. It is to be hoped that by degrees the Resident Medical Superintendent will be able to introduce tablecloths, glass and delf vessels, and knives and forks. Such things are now almost universally used. Some persons do not understand why we recommend such things for pauper lunatics, or why we should seek to surround them with amenities and comforts to which they had been accustomed in their own homes. As we have already said, reporting on the other asylum of this province, "it is not because birds, and flowers, and bright rugs, and easy chairs are pleasing to the eye of visitors and inspectors, that they are recommended. It is because such things, like the farm which provides means of physical exercise, enter into the curative treatment, and help largely to divert the morbid thoughts, and suggestions of the insane." Indeed the modern treatment of insanity might be almost summed up in the two words—occupation and recreation. In the farm and in the workshops we try to find a healthy vent for the patients' excitement, while indoors we seek to turn their morbid thoughts into new channels by amusement and interesting objects.

Overcrowding.

The institution continues to be very much overcrowded. As the counties (Galway and Roscommon) which constitute the asylum district are not wealthy, the question of how increased accommodation for the insane poor can best be provided at a moderate cost is one of great practical importance. One at least of the fiscal authorities concerned, the Roscommon Grand Jury, seems to consider that increased accommodation might be provided by converting the workhouse buildings of the Strokestown Union into an auxiliary asylum. The experience, however, of those who have specially studied this question, teaches us that the conversion of workhouse buildings into good accommodation for the insane is both difficult and costly, and that it is a mistake to suppose that workhouse buildings can ever provide really satisfactory accommodation for the insane. Nor is it clear that any large saving would be

effected owing to the great cost involved in modifying such buildings for asylum purposes. It is quite true that in Scotland vacant poorhouse accommodation has been utilised as accommodation for lunatics; but, speaking from personal knowledge, I can say that these licensed lunatic departments of Scotch poorhouses provide as expensive and good accommodation as Ballinasloe and many other of our District Asylums of Ireland. If the Strokestown Union were dissolved, and it were seriously contemplated to convert the workhouse into an auxiliary asylum, there would be the great initial cost of alterations, and the necessity of acquiring additional land. It would be necessary to appoint and maintain a separate staff; and lastly, it would still be necessary to expend a considerable sum in improving the hospital accommodation at the parent asylum. The Governors have, therefore, in my opinion, adopted the wisest course in dealing with the large and important question of increased accommodation. They have determined to erect a large hospital building, not so much for the treatment of the bodily sick, who, as a rule, are few among an asylum population, but especially for the reception and treatment of curable and acute cases. The greater prominence given to the hospital department, as distinguished from infirmary wards, is one of the features of modern asylums. When the proposed hospital has been completed, the asylum will consist of two sections; one—the main building—will provide a home for the chronic and harmless patients who require no special treatment; while the other, and small hospital section, will accommodate, not alone those suffering from acute illness, but those requiring special medical attention and nursing, whether newly admitted, suicidal, dangerous, feeble, or dirty and degraded, and who, as such, need special care and attention.

The Governors have also most wisely determined to enlarge their farm, so as to provide increased means of occupation for the male patients, and with this view steps have been taken to acquire a large farm contiguous to the asylum.

BALLINASLOE
ASYLUM.

Hospital to be
erected for
acute cases.

Farm to be
enlarged.

30th June, 1893.

CARLOW DISTRICT LUNATIC ASYLUM.

CARLOW
ASYLUM.

There are resident in this Institution, 175 men, and 148 women; total 323. Since my last visit, the following changes have taken place:—

Inspected on
13th June,
1893.

| | Males. | Females. | Total. |
|---|--------|----------|--------|
| In the Asylum 22nd September, 1892, . . . | 173 | 155 | 328 |
| Admitted since, | 33 | 21 | 54 |
| | 206 | 176 | 382 |
| Discharged, | 25 | 21 | 46 |
| Died, | 6 | 10 | 16 |
| | 31 | 31 | 62 |
| Remaining 13th June, 1893, | 175 | 148 | 323 |

CARLOW
ASYLUM.

—
Additions
necessary not
yet made.

So far nothing has been done to carry out the alterations and additions to this Asylum, so much required, and so long waited for. However, the tenders for the work required in the administrative block have now been sent in, and no reason exists why the work should not be carried out without further delay. In the meanwhile the plans for the additions to the accommodation will require further consideration.

Deaths.

The deaths would appear to be due in all cases to chronic disease. None were from violence or accident. In no case was a *post-mortem* examination made. It is to be hoped that when the structural alterations at this Asylum are being carried out, a suitable mortuary will be provided, and these examinations—so important for the safety of the insane, and for the progress of medical science—will become more frequent.

Mortuary
required.

Health.

The health of the patients is at present remarkably good, and since my last visit there has been no outbreak of dysentery, or any form of zymotic disease, but it must be remembered that the present condition of the asylum—the overcrowding of the wards, the defective sewerage, and the want of an adequate water supply—must render the inmates of the Institution especially liable to suffer from the effects of any prevailing epidemic. I would, therefore, urge on the Governors the importance of taking the necessary steps to meet the danger of an outbreak of cholera, with which we are threatened during the coming summer. This can be done at a small expense, and within a limited period, by erecting a small detached wooden hospital. A suitable plan for such a hospital has been sent to the Medical Superintendent.

Three men and one woman are at present confined to bed from bodily illness—one of these is suffering from severe laceration of the face caused by a blow from another excited patient. I saw one man and one woman in bed from excitement, but restraint does not appear to have been resorted to since my last visit.

Clothing.

I saw all the patients, both men and women, and I was pleased with their appearance. Summer and winter clothes are now provided; the men were dressed in tweed suits, and the women have calico dresses. This has effected the greatest improvement in their condition, as it has instilled a feeling of pride in their personal appearance on the part of the patients, and a desire on the part of the attendants to have those under their charge becomingly dressed. With the clothing of the female patients I was especially pleased, as their dresses fitted them properly, and their hair was tidy.

Bedding.

The bedding has also much improved. New bedsteads, with wire bottoms and hair mattresses are by degrees being introduced. New sheeting of improved quality has been obtained. The linen throughout the wards, considering the very inadequate capabilities of the laundry to meet the requirements of the patients, was wonderfully clean.

Day room.

Much has been done to improve the appearance of the day-rooms by painting and decoration, and by the introduction of a few homely articles of furniture, such as chairs, tables, curtains, &c.

Dietary.

No change has been made in the dietary, and until a new kitchen, with proper cooking appliances, has been provided, it is impossible strictly to adhere to the diet scale lately sanctioned.

I saw the men at dinner, and was pleased to find that the patients on both sides of the house are provided with plates, bowls, knives and forks, and that proper attention is given to the service of the food.

The staff has been increased by the addition of three male and two female attendants, so that the proportion of attendants to patients has now been raised to its proper ratio.

The Governors have at great personal trouble, and in a most liberal spirit, drawn up a scale of wages for the remuneration of their staff, which ought to attract eligible candidates, and which is commensurate with the wages generally paid in Irish asylums.

On the 11th June 87 men and 66 women attended Mass, while 6 Divine service. men and 15 women were present at the Protestant worship.

I examined the books and registers. No case-book appears to be Books kept.

The accounts have not yet been audited, so that I am not in a position to refer to them. It would appear, however, that the expenditure is somewhat higher than that of previous years. The cost involved by the increase and improvement of the stock of clothing, bedding, and furniture, must of necessity cause extra expenditure under these headings. This expenditure ought, however, to result in economy in the future.

16th June, 1893.

CARLOW
ASYLUM.

CASTLEBAR DISTRICT ASYLUM.

CASTLEBAR
ASYLUM.

We inspected Castlebar District Asylum on the 12th and 13th instant and saw all the patients then resident. The last inspection was made in August, 1892, and the following changes have taken place since then :—

Inspected on
12th and 13th
October, 1893.

| | Male. | Female. | Total. |
|---------------------------------------|-------|---------|--------|
| On Register 3rd August, 1892, . . . | 249 | 157 | 406 |
| Admitted since, | 90 | 62 | 152 |
| | 339 | 219 | 558 |
| Discharged recovered, | 48 | 25 | 73 |
| Discharged unrecovered, | 4 | 2 | 6 |
| Died, | 23 | 19 | 42 |
| | 75 | 46 | 121 |
| Resident on 12th October, 1893, . . . | 264 | 173 | 437 |

CASTLEBAR
ASYLUM.

The causes of the 42 deaths were as follows :—

Deaths,

| | Males. | Females. | Total. |
|--------------------------------|--------|----------|--------|
| Consumption, | 7 | 6 | 13 |
| Exhaustion after Mania, &c., . | 2 | 4 | 6 |
| Epilepsy and Convulsions, . | 5 | 4 | 9 |
| General Debility and Old Age, | 5 | 3 | 8 |
| Cancer, | 1 | - | 1 |
| Inflammation of the Lungs, . | 3 | 1 | 4 |
| Organic Disease, | - | 1 | 1 |
| | 23 | 19 | 42 |

Water supply
and sewage.

At the present time the establishment is suffering from a great scarcity of water, a leakage having taken place from the sewerage system into the quarry-reservoir which supplied the water for flushing and washing, necessitating the cutting off of this source of supply. Both the question of the disposal of sewage and water supply have been for a long time under consideration. Last year arrangements were made to carry away and discharge the sewage some distance from the asylum, but objections were afterwards raised by the Local Sanitary Authority, on the ground that it contaminated the river passing through the town of Castlebar. As it was, we understand, found impossible to utilise the sewage by irrigation owing to the low level of the surrounding land, it was found necessary, in order to meet the objections thus raised, to carry the drains back to their original position and discharge on the asylum grounds. In making the necessary alterations a leakage took place from the bottom of the sewage tank, which allowed sewage matter to be carried into the quarry-reservoir, from which, as we have stated, the water for washing and flushing is obtained. This water was cut off on the 17th September last, causing very great inconvenience, as the deep well within the asylum buildings only supplies sufficient water for cooking and drinking. That any gross pollution, such as occurred, should be possible, is most unsatisfactory in any public institution, and calls for immediate remedy. We certainly are of opinion that the water obtained from the quarry-reservoir is quite unfit for use, and should be abandoned as a source of supply, as it is in close contiguity to the sewage tank, and, it would seem to us, that the permanent prevention of contamination is practically impossible. It might, however, be found feasible to obtain a much larger supply than at present from the deep well to which we have referred. Every effort should be made to obtain, once for all, a pure, constant, and sufficient water supply, and to prevent the sewerage discharge becoming a nuisance and danger to the patients.

General
condition.

Having regard to the scarcity of water, we could scarcely expect to find the condition of the institution in many respects satisfactory. On the first day of our visit the floors in many parts of the building were dirty, and the different apartments occupied by the patients seemed cold and cheerless. The day was cold, yet few fires were lighted except in the male hospital and female hospital dayroom, not even in the female hospital dormitory, in which three women were lying ill. On the second day

we found, however, the floors being cleansed, and additional fires had been lighted, conveying a better impression of management.

Although allowance must be made owing, to the want of water for washing and bathing, we are still of opinion that sufficient regard is not paid to the condition of the male patients by the attendants; the men are untidy in their dress and in their persons, their clothes are torn and shabby, while, we think, that with greater attention, much might be done to improve the degraded habits of many of these patients. We saw the men at dinner; very little attention appears to be paid to the manner in which the meal is served; the only utensils are tin howls and spoons as described in our last report. It may be thought that to supply lunatics with tablecloths, knives, forks, plates, and dishes is only useless trouble, but the experience of asylums in this and other countries proves that nothing has a greater influence on the condition of the insane than attention to such matters.

We afterwards inspected the male patients in their dayrooms. The greater number were found crowded together in one dayroom and one corridor, while a great part of the space intended as dayroom accommodation would not appear to be used. Excellent dayroom accommodation has been provided at very great expense, and we cannot understand why it is not utilised, as all this accommodation is certainly now required owing to the increase which has taken place in the number of male patients. Many of the dayrooms are practically unfurnished, void even of a chair, and destitute of every appearance of comfort.

We found the female patients fairly tidy, and 12 women usefully employed in the female workroom; one or two using the old fashioned spinning wheel formerly so common in this country. About 30 are employed washing on Mondays and Tuesdays, and from 4 to 7 on other days, ironing, &c. Some of the machinery of the laundry requires to be repaired, and we think an earnest effort should be made to increase the efficiency of this department, not only to obtain a better supply of clean linen, but to give employment to a larger number of the female patients. This can be done at once by instituting a foul laundry for the daily washing of the clothes soiled the preceding night.

The dress on the female side consists of a linsey skirt and petticoat, two cotton jackets, handkerchief, shawl, and boots, and socks.

The women's bedding was generally clean, and we are informed that the Governors contemplate getting rid altogether of the straw ticks, which are so objectionable for the use of the insane. Three women were in bed in the hospital dormitory—one suffering from a severe scalp wound inflicted by another patient, and one woman was in seclusion.

In former reports we dwelt on the importance of artificial heating of the asylum. A system of hot water pipes exists in some of the old corridors, but they are practically disused. The Medical Superintendent informed us that when he tested the temperature of the corridors and single rooms, and also got the night attendant to take temperatures during the night, he found the temperature in cold winter weather to be close to freezing point. It appears to us a cruel and anomalous arrangement that the neighbouring prison cells occupied by pickpockets and other malefactors should be maintained, even in the coldest weather at an equable temperature of 60 degrees or 65 degrees Fah., while the temperature of the rooms occupied by the insane, who not unfrequently divest themselves of all covering during the night, should in cold weather be scarcely above 32 degrees.

Apart from the question of artificial heating, it would seem to us that of the amount of coal actually used a sufficient quantity does not reach the

CASTLEBAR
ASYLUM.

patients' fireplaces. Taking the coldest month last winter, we find that during the four weeks ending the 2nd January, out of a total consumption of 50 tons, only 9 tons 1 cwt. were burned in the patients' dayrooms and dormitories. Similarly, for the four weeks ending 2nd March, out of a total consumption of 40 tons 11 cwt., only 7 tons 12 cwt., went directly to supply heat to the patients' rooms, the remainder of the coal consumed going to the engine-room, laundry, kitchen, workshops, workrooms, and for the use of the officers and attendants. We consider that the building should be heated throughout by artificial means. If, however, the Governors do not see their way to approve of an expenditure, which to us seems so absolutely and essentially necessary for the patients' comfort and treatment, at least the existing furnaces for heating parts of the building should be kept burning throughout the winter, while good fires should be maintained in all the open grates throughout the house.

Quality of
food.

We examined the food supply, and were not quite satisfied with the quality of all of it. The milk, a most important article in the dietary of the insane, seems constantly not to render the contract return of cream; the soup prepared for the patients on the day of our visit seemed little better than vegetable broth, while the meat, which was cut up to be mixed in it, appeared dry and innutritious. It is usual now-a-days in many Irish asylums, as elsewhere, to give the patients a slice of boiled or roast meat on the days meat is served, and in lieu of soup, which the patients as a rule so little relish. This arrangement has not been found to entail any large increase of expenditure.

The Boards of Governors adopted a recommendation in our last report to substitute tea for cocoa for supper, a change which, we are informed, is much appreciated by the patients.

Wine and
spirits.

Our attention has been attracted to the large expenditure on wine and spirits in this asylum. Thus, during the year 1892, while the expenditure under this head at Castlebar amounted to 11s. 4d. per caput, at the only other asylum in North Connaught, Sligo, with practically the same number of patients, the cost was only 8d., and at Armagh—an asylum conducted on the most liberal and advanced principles—3d. per head. The total expenditure on wine and spirits at Castlebar for the year 1892 was £229 13s. 2d., and at Armagh, £3 16s. 3d., while the corresponding figures for the preceding year (1891) were £269 9s. 4d., and £2 4s., respectively. On investigating the matter further, we find it is the custom at Castlebar to allow the attendants a considerable quantity of extras, and to enter these in the sick diet book. In other asylums it is customary to order attendants who are actually ill, and off duty, any stimulants which may be deemed necessary, but the practice of allowing stimulants to attendants not actually on the sick list does not, so far as we are aware, obtain elsewhere. The following is a summary taken from the sick diet book, showing the daily issue of all extras for the month of September last:—

| | | | |
|-------------------------|-------------|-----------------------|------------|
| Tea, | 3½ ozs. | Porter, | 33½ pints. |
| Bread, | 50 ozs. | Whiskey, | 6 glasses. |
| Butter, | 23½ ozs. | Brandy, | 3 glasses. |
| Eggs, | 66 | Extra Milk, | 37 pints. |
| Mutton Chops, | 11 | Sugar, | 14 ozs. |
| Beef Tea, | 1 pint. | Gin, | 2 glasses. |
| Wine, | 83 glasses. | Rice, | 16 ozs. |

and of these no less than 15 eggs, 5 mutton chops, 5 glasses of wine, 10 pints of porter, 6 glasses of brandy, 4 pints of milk, 2 glasses of gin, and

8 ounces of rice went daily to attendants. It thus appears that out of 25 ordinary male and female attendants, and two night attendants, no less than 18 were, during the month, getting as extras either wine, spirits, or porter. The gardener, suffering for some days from a cold or cough in the beginning of August, was ordered two glasses of brandy a day, and remained on it till the 5th October. We must not be taken as objecting to any reasonable indulgence being given to attendants. On the contrary, we would wish in very many instances to see their status and remuneration raised, but we cannot conceive that this almost indiscriminate use of stimulants among them can be necessary on the ground of health, or can conduce to the more efficient discharge of their duties.

CASTLEHAR
ASYLUM.

Additions would appear to have been made to the staff from time to time, but not in proportion to the increase in the number of patients. At present there are 15 men and 10 women in actual charge of the insane, giving a ratio of about one attendant to 17 patients; this is much below the proportion which ought to exist in public asylums. Further the Governors must see that the night staff is quite inadequate to take charge of the existing number of patients. To hold one man responsible for the care, and nursing of 264, and one woman for the safe-keeping of 173 insane persons would be impossible. Every excuse must, therefore, be made for the dirty and degraded habits of the patients, and, in the event of any accident taking place, the night staff could scarcely, under such circumstances, be held solely responsible. The report made by the present male night attendant is illegible, owing to bad writing, and Dr. Hatchell reports that the night nurse is ill-suited for her post both mentally and physically.

The statutory books relating to the condition of the patients and their treatment are either not kept, or not fully posted. The medical superintendents inform us that he has not time to keep up these different books, and having regard to the great size which the Castlehar Asylum has now reached, we deem it our duty to again urge on the Governors the necessity which exists for the appointment of an assistant medical officer. There is, probably, now no other asylum in the world containing so large a number of patients with but a single resident medical officer, while the last issue of the Privy Council Rules clearly contemplates that there should be at least one assistant medical officer attached to each asylum in Ireland, and this applies with double force to Castlehar, where there is no apothecary attached to the institution.

Assistant
Medical Officer
required.

We regret that we are unable to write more favourably of the asylum all the more so as we believe the Governors are anxious to do everything in their power to improve its condition, and because a very large sum has in recent years been spent in structural improvements and alterations. The accommodation which exists could, we think, be utilised to much greater advantage than at present, and we would suggest to the Governors that they should appoint a small committee of their body to confer with us at the asylum as to how the defects which at present exist can be best remedied, and how the working of the institution can be placed on a more satisfactory basis. It would be our pleasure, as it is our duty, to meet and confer with the Governors on these matters if they will allow us to do so.

Defects.

20th October, 1893.

CLONMEL
ASYLUM.

CLONMEL DISTRICT ASYLUM.

Inspected on 20th Oct., 1898.
Additions and Alterations.

The various additions and alterations to the administrative departments and the erection of the new ward at the female house of this Asylum are now progressing towards completion. These works comprise the extension of the dining-room, so as to allow almost the whole of the female patients to dine together; the erection of a scullery in connection with this room, the re-tiling of the kitchen, the reorganization of the laundry (which comprises the erection of a new drying-room, worked by a Blackman fan), the addition of two washing machines and an ironing machine. This department is now fitted up with all the modern appliances requisite for carrying on the washing of so large an establishment, and will certainly bear comparison with the laundries of other similar institutions. The block for the reception of 40 females is now being roofed in, so that the internal fittings can be carried on during the cold weather. This block consists of a day-room to contain 40 patients on the ground floor, and two dormitories with commodious bath-room and lavatories.

Site of proposed mortuary.

The proposed mortuary has not yet been commenced; but I must here point out that the site selected for the erection of this building is most unsuitable, situated as it is at the entrance of the male building, exposed to the view of the male patients going in and coming out; whereas a mortuary should be as much as possible out of view, and should be built on the boundary wall of the Asylum, so that under no circumstances should the mourners attending the funeral be allowed to enter the Asylum grounds.

Furniture.

Furniture has still to be obtained for the new dining-room and wards and some additional fittings for the laundry. The tables and chairs for the dining-room will, I hope, be supplied in a short time, so as to enable this room to be utilized by the patients, as up to this they have been obliged to dine in their day-rooms, which are much overcrowded and are ill-suited for such a purpose.

Accommodation.

When the additional accommodation on the female side is completed, it is proposed to remove to it the 52 women who are at present, for want of room, located in the male house, so that this new building will make no provision for fresh admissions. The institution is estimated to accommodate 600 patients (300 in each house). It is doubtful how far this estimate affords the space now insisted on by the Board of Control, but even if the estimated accommodation is correct, the Asylum must now be considered to contain its full complement of patients. If we look back for ten years, we find the numbers then resident were 224 men and 211 women, so that in this interval of time an increase of 104 men and 101 women has taken place. As there is every reason to suppose that a similar increase will take place in the next ten years, the mode in which additional accommodation for the insane poor of the district is to be provided ought to be, without delay, considered by the Governors. In a report on this Asylum, dated 7th October, 1890, we suggested that such extension of accommodation would be best made by the "erection of an infirmary in proximity to the upper house, for the care, nursing, and observation of new admissions and cases requiring special medical supervision," and I must again repeat the suggestion, as this plan is now so largely adopted in dealing with extensions of old Asylums, such as Clonmel.

Another subject which I would ask the Governors to consider is the purchase of additional land. At present the amount of land attached to the asylum, exclusive of ground under buildings, &c., consists of 26 acres. This cannot be considered sufficient to afford occupation for the number of men who could be advantageously employed, or a sufficiently extended area for exercise. The minimum amount of land which is thought requisite for such an institution is one acre to ten patients, and large farms are now attached to all public asylums in other countries. The Governors have always shown so great an interest in the insane, and have with so great liberality provided for the wants of the lunatic poor, that I trust they will not hesitate to supply this very great want. They must be aware that industrial occupation tends more perhaps than anything else to the improvement of the condition of the insane. The necessary outlay should not be considered as imposing any additional burden on the ratepayers. A farm attached to such an institution, worked by the inmates, should prove a source of profit, and tend to diminish the annual cost of maintenance. Such has been the result in other similar institutions.

The following changes have taken place amongst the patients since the 1st January, 1893 :—

CLONMEL
ASYLUM.
Additional
land.

| — | Males. | Females. | Total. |
|-----------------------------------|--------|----------|--------|
| On Register, 1st January, 1893, . | 315 | 306 | 621 |
| Admitted since, . . . | 44 | 51 | 95 |
| | 359 | 357 | 716 |
| Discharged recovered, . . | 17 | 28 | 45 |
| Discharged unrecovered . . | 8 | 5 | 13 |
| Died, | 6 | 17 | 23 |
| Total, | 34 | 45 | 79 |
| On Register, 30th October, 1893, | 325 | 312 | 637 |

The deaths appear to have been all from ordinary causes, and call for no remarks. In no case does the cause of death appear to have been verified by post mortem examination. Up to this it has been almost impossible to carry out such examinations owing to the want of a proper room, but when the new dead-house is completed, it is to be hoped, whenever possible, the cause of death will be verified by autopsy.

The general health of the inmates appears to be good, only 13 men and 8 women are confined to bed, nor during the past year has there been any disorder of an epidemic character.

According to the Medical Journal, the patients secluded since the 1st January have been nine, for periods varying from two to eight hours. Four patients have been restrained—two by gloves, and two by camisole. The list of accidents includes a fracture of the thigh from a fall, a sprained ankle, and the dislocation of the bones of the forearm.

Deaths.

Health.

Restraint and
seclusion.

CLONNELL
ASYLUM.
General condition of
patients.

I saw every patient resident at the time of my visit. The men were very quiet and well behaved, but amongst the more excitable women there was a good deal of noise. This is to be accounted for by the number of this class who at present are congregated together. Dr. Garner hopes when the new addition is completed to scatter these patients as much as possible amongst the others. Both men and women appeared to be well dressed, clean, and tidy in their appearance, and the materials used for their clothing seemed of good quality. The beds and bedding deserve special praise. In no other similar institution have I seen better provision in this respect. The sheets are clean, and the material used in the bedding is of excellent quality.

Many alterations have been carried out by the aid of the staff. Throughout both houses many of the dayrooms, dormitories, and single rooms have been neatly papered and painted. The male hospital dayroom has been floored and wainscotted, and the windows lowered. An end window has been erected in the dayroom of No. 3. New drains have been laid in various parts of the institution. Two new water closets have been fitted up, and three large flushing tanks erected.

Staff.

Very few alterations have been made in the strength of the staff. It would appear that exclusive of artisans, head and night attendants, 21 men and 22 women are in actual charge of the insane in their wards, giving a ratio of about one attendant to 15 patients on the male side, and of one to 16 on the female side—not a strong staff; but the number of artisans employed must be taken into consideration.

Two attendants are now employed during the night on each side. Considering that on the female side one of the night nurses has to remain in the hospital, I would suggest that the services of a third female night attendant should be obtained.

The numbers on the female side have now so largely increased, and the amount of work carried on in the kitchen, laundry, and workrooms is so considerable, that I think it is almost impossible for the Matron to properly supervise the working of all these different departments, and I would therefore suggest, for the consideration of the Governors, the appointment of a Head Nurse, who would assist the Matron in her onerous duties. I think the Governors should favourably consider this suggestion, as the present Matron has for so many years rendered such valuable services to the institution.

Employment.

As regards employment, 72 men work on the farm and 24 are engaged with the artisans. 33 women go to the laundry, and 69 employ themselves at knitting and sewing. I cannot but think that if a larger number of women were employed at washing there would be much less noise and excitement on the female side. So much has been done to extend the capacity of the laundry, and to render this department capable of meeting the requirements of the establishment, that the employment of the patients, so essential to their contentment and improvement, should not be forgotten.

Books.

The books and registers are carefully kept, and the case-books, giving histories of all cases in the Asylum, are now posted up to the present date.

Divine service.

The Chaplains' books show that on the Sunday previous to inspection 197 males and 202 females attended Mass, while 8 men and 10 women were present at the Protestant worship.

27th October, 1893.

CORK DISTRICT LUNATIC ASYLUM.

Conk
ASYLUM.

Since the last inspection of this institution, a number of alterations and additions have been carried out, and a number are now in progress. The principal work has been the completion of the new block, which will give accommodation for 430 male patients. This block is now being connected with the main house by an overground passage, so as to enable the residents in it to take their meals in the general dining-room.

Inspected on
15th, 16th, &
17th Nov.,
1893.

The new building is of four stories, and affords excellent accommodation for quiet and well conducted patients. The rooms are large, well ventilated, bright, and cheerful. The heating is done on the Galton system, but it has not been sufficiently long at work to enable any conclusion to be come to as to its efficacy. Daily records should be kept of the minimum temperature in each room, so as to enable the engineer to gain experience in the regulation of the heat. The rooms are as yet only partially furnished, and the bedding supplied appears to be worn and badly cared for. It would appear to me wiser to have used up the old bedding in the main building amongst the more troublesome patients, instead of sending it down to these new and handsome rooms. The attendants can hardly be expected to take a proper pride in the condition of their wards when they are supplied with a worn-out stock.

New Building.

As yet only 241 patients have been removed to this building, and until the connecting passage is completed, it would be difficult to manage a larger number; but as soon as possible I would suggest that the furnishing should be completed, and the full quota which the building is capable of accommodating removed to their new quarters, so as to leave vacant their old wards in the main building, which it is proposed to hand over to the females. But, before these wards can be occupied by the women, certain minor alterations—plastering, painting, and renovating—must be carried out. This work can be done by the aid of the staff, with some assistance. In order to carry out the work in this manner, and avoid trouble and confusion, one ward at a time should be left vacant, and given over to the tradesmen, until these improvements are completed.

Since last report the following works have been carried out, or are in progress, under contract, in addition to the completion of the new male block and the connecting passage now in progress:—

Works carried
out or in
progress.

1. New drainage has been laid in the front of the institution, and the outlet of the sewerage has been improved.
2. A lodge has been erected at the back gate.
3. The hospital has been heated with hot water.
4. New sanitary annexes are in course of erection in the main building.
5. A mortuary has been built.
6. A fire-escape has been provided.

The following works have been carried out by the asylum staff:—

1. New sanitary annexes have been erected at the hospital.
2. New padded room has been fitted up on the female side.
3. Cart shed, clothing store, and engineer's shop erected.
4. Carving table erected in dining hall.

The most important works now in progress, no doubt, are the new sanitary annexes and additions, and alterations in the laundry. The former

K

CORK
ASYLUM.

provide bathrooms, lavatories, and waterclosets to the main buildings. The necessity for these works has been frequently referred to in former reports, and I trust that the plans now being carried out will provide the required accommodation. The latter works will, when completed, render the laundry department capable of meeting the requirements of so large an institution, by enabling the washing to be done in a satisfactory manner, while giving increased employment to a large number of female patients.

Statistics.

At present the Asylum contains 1,126 patients—581 men and 545 women—an increase of 40 since the last report on the 28th November, 1892. During the interval the following changes have taken place amongst the patients:—

| | Male. | Female. | Total. |
|-------------------------------------|-------|---------|--------|
| On Register, 23-11-92, | 553 | 533 | 1,086 |
| Admitted since, | 143 | 120 | 263 |
| | 696 | 653 | 1,349 |
| Discharged Recovered, | 43 | 45 | 88 |
| Discharged Unrecovered. | 21 | 20 | 41 |
| Died, | 46 | 43 | 89 |
| Total, | 116 | 108 | 223 |
| On Register at this date, | 581 | 545 | 1,126 |

Deaths.

Of the deaths, 63 were due to diseases of the heart and lungs, 13 to brain disease, and 1 is recorded as due to typhus fever. In only four cases can the causes be said to have been other than natural—in one from drowning, in another from fracture of the ribs caused in a struggle with an attendant. Both these cases have been so exhaustively inquired into that it can serve no useful purpose to again reiterate the facts. Two deaths are said to have been due to suffocation in epileptic fits. Here I must again suggest that steps should at once be taken to fit up an observation dormitory, where all cases of epilepsy or of a suicidal tendency should be under constant care. Such a dormitory is an absolute necessity in so large an institution, as it is only by this means that such cases can be properly protected. I can see no difficulty in selecting a room for the purpose. Any of the corridors will suit, or, if it is objectionable to use these corridors for such a purpose, any of the large dormitories can be utilised by having a few single rooms erected at one end. Dr. Woods is of opinion that one such dormitory on either side will be sufficient for the present.

Observation
dormitory
suggested.

Autopsies.

In sixteen cases the cause of death was investigated by *post-mortem* examination. This is a slight advance on last year, and I hope, now that a mortuary has been provided, autopsies will be more frequent, and that the Cork Asylum will take its place amongst other similar institutions in furthering the pathological study of insanity.

Accidents.

The records of accidents show that during the past year there have been five fractures of bones, one case of concussion of the brain from a

blow, and two incised wounds of the face. The case of concussion resulted from a blow given by one patient to another; the symptoms were in no way serious.

CORR.
ASYLUM.

Restraint has been resorted to in the treatment of five patients, and seventy-six patients have been secluded for different periods. The wild bursts of excitement which characterise the insanity of one or two of the female patients necessitate much more frequent resort to restraint and seclusion than would be found necessary amongst a less demonstrative class of the insane. Restraint and seclusion.

Twenty-two men and nine women are confined to bed, nearly all Sick. suffering from chronic disease. There is at present one case of facial erysipelas, and four patients are stated to have been attacked with the disease during the past year; but, with these exceptions, and the case of typhus fever already referred to, there has been little zymotic disease amongst the patients. One or two of the attendants have, however, been attacked with typhoid fever, but it is doubtful if the disease was contracted in the Asylum.

I may here call attention to the improvement which has taken place in the treatment of the sick.

Much has been done to add to their comfort. The hospital has been heated with hot water, the rooms have been painted, decorated, and re-furnished; new lavatories, bathrooms and waterclosets have been erected, and, above all, the patients are now under the charge of paid attendants both by day and night. In my opinion this hospital reflects the greatest credit on the Board of Governors, showing the interest which they take in suffering humanity. Further they may feel assured that in thus improving their hospital they are following the course now adopted in the most modern asylums throughout the world. I trust Dr. Woods will in a short time be able to convert the building at the rear of the hospital, which was evidently intended as an infectious block, to its original use. It would prove a most useful addition to the hospital in the treatment of ordinary disease, when no infectious disease existed. At present it is only used as a residence for attendants. Hospital.

All the patients were seen by me either in the wards or in the grounds. On both sides they were clean and neat in their persons. On the female side I think special praise is due for the improvement which has taken place in the clothing. The dresses are made with due regard to the natural taste of the female sex for neatness and variety. Clothing.

Amongst the women are one or two cases of extreme excitability, whose sudden fits of excitement disturb the rest; but with these exceptions, the conduct of the patients during my visit was quiet and orderly. Excitable patients.

The bedding is of fair quality, and ample in quantity. Considering the very inadequate means of washing at the present time, the linen was, with some exceptions in the new male block, fairly clean. Bedding.

I saw the patients at dinner in the dining-hall.

Dinner.

Some improvement has been made in the service of the meals, and a carrying table has been provided. The hall is, however, now much overcrowded. Dr. Woods hopes in time to be able to remove a number of

**CORK
ASYLUM.**

the women to the recreation hall ; but until this is done it is impossible to maintain the order and regularity which ought to exist, owing to the overcrowding at the tables.

Employment.

The records of employment show that 345 men and 421 women are engaged at some useful occupation. Of these 142 men work on the farm, 43 are employed at various trades ; 63 women work in the laundry, and 187 are engaged at various sorts of needlework. This shows that about 60 per cent. are employed on the male, and about 77 per cent. on the female side. Although the number on the male side is scarcely up to the return shown in some asylums, still, I think, that it is a creditable one, considering the difficulties caused by the various structural alterations.

Staff.

The staff now consists of 47 men and 40 women in actual attendance on the insane, giving a ratio of about one attendant to eleven patients. This is the ratio generally considered necessary in public asylums, and, I think, every praise is due to the Governors for their readiness and willingness to place the staff on a proper footing. Since the last inspection the following additions have been made :—

Two hospital nurses now take charge of the male hospital. Three charge and three ordinary attendants, and one stoker, have been added to the male staff ; the female staff has been increased by two charge and three ordinary attendants, and the night staff by two male and one female attendant, so that the number on night duty is now five males and four female attendants. It might be well to consider, having regard to the number now employed during the night when there is no officer on duty, whether it would not be wise, on the female side at least, to make one responsible for the conduct of the rest. On the male side this would be impossible owing to the distance of the new block from the main building.

Divine service. The Chaplains' books show that on the Sunday previous to inspection :—

227 men and 192 women attended Mass ;

17 men and 13 women were present at the Episcopalian worship ; while

3 men and 3 women attended the Presbyterian service.

Amusements.

The associated entertainments afford amusement on an average to over 300, and extended walking exercise is enjoyed by 50 men and 70 women.

Books.

The various registers and books, including the case books, were examined by me, and found written up to date.

I think that the time will soon arrive (if the asylum goes on increasing as rapidly in the future as it has in the past) when it will be necessary to appoint a third Assistant Medical Officer who should reside in the main building, as Dr. Woods is at present the only Medical Officer living in this part of the asylum, so that he is liable to constant calls, both by day and night, in addition to his important office work.

24th November, 1893.

ENNIS DISTRICT ASYLUM.

ENNIS
ASYLUM.

I visited Ennis District Lunatic Asylum on the 16th November, 1893, and saw all the patients resident. Inspected on 16th Nov., 1893.

The following Table shows the change of population since last inspection :— Statistics.

| — | Males. | Females. | Total. |
|--|--------|----------|--------|
| On register 14th December, 1892, | 206 | 150 | 356 |
| Admitted since, | 54 | 45 | 99 |
| | 254 | 195 | 449 |
| Discharged recovered, | 17 | 18 | 35 |
| Discharged unrecovered, | 18 | 5 | 23 |
| Died, | 14 | 9 | 23 |
| | 49 | 32 | 81 |
| On register at this date, | 205 | 163 | 368 |

The condition of the patients on the day of my visit was as follows :—

| — | Males. | Females. | Total. |
|--------------------------------|--------|----------|--------|
| In bed, | 7 | 4 | 11 |
| In seclusion, | 1 | 1 | 2 |
| In restraint, | 1 | — | 1 |
| Wet last night, | 5 | — | 5 |
| Raised by attendant, | 15 | 24 | 39 |
| On parole— | | | |
| Beyond grounds, | 2 | 2 | 4 |
| Within grounds, | 65 | 11 | 76 |

The number of entries in the register of restraint and seclusion since the 14th December, 1892, is six. These refer to the restraint of one, and the seclusion of four persons. I regret to have to state that it is evident these entries do not set forth the actual amount of restraint and seclusion which have been resorted to in the patients' treatment. The only entry in the Medical Journal is the seclusion of a suicidal patient (C.H.) from the 19th August to the beginning of September, while in the Morning Statement Book the seclusion of two patients on the 27th and 28th May is recorded. I found to-day a patient (D.K.) who has been for a considerable time under mechanical restraint, wearing

Restraint and seclusion, all entries not made.

ENNIS ASYLUM.

a leather muff, which threatens ulceration of one wrist, while three patients are secluded in locked rooms. I do not intend to convey that any unjustifiable restraint or seclusion has been used, or that such treatment has been adopted in any case except where, in the opinion of the medical officers, it was absolutely required.

It is, however, my statutory duty to point out that the law requires that every individual application of restraint or seclusion, be it long, or be it short, moderate, or severe, shall be recorded in the Book, and in the form prescribed by Act of Parliament.

But, apart from statutory obligation, it is evident that asylum statistics, which go forth annually throughout the United Kingdom, become a mockery of accuracy if they fail to show literally such important points in the asylum treatment as the number of patients placed in seclusion or under mechanical restraint.

General condition.

I am glad to be able to report that I found all parts of the Institution clean, and that as great tranquillity and order prevailed as could be expected among such a large and overcrowded number of the insane. There have been four accidents of a serious character, which may be noted shortly as follows :—

Accidents.

| Nature of serious accidents. | Males. | Females. |
|---|--------|----------|
| Struck with chamber utensil by another patient, . . | 1 | - |
| Struck on lip by stone thrown by another patient, . . | 1 | - |
| Cut an artery in hand by breaking glass in door, . . . | - | 1 |
| Leg broken by being thrown against a form in yard by another patient. | 1 | - |

Suicide.

One patient committed suicide by strangulation on the 11th April last. He was last seen alive at 12.55 a.m., but on the night attendant going his usual rounds at 1.30 a.m., he was found dead in his room, having strangled himself with a portion of his sheet. A coroner's inquest was held, when, after full inquiry, the jury returned a verdict to the effect that the deceased committed suicide by strangulation, adding that they were unanimously of opinion that no blame was attachable to any person in connection with the death of the deceased.

Deaths.

The causes of the twenty-three deaths which have occurred since the date of last inspection were as follows :—

| | |
|----------------------------|-------------------------------|
| Phthisis, 4 | General debility, 2 |
| Pneumonia, 4 | Epilepsy, 2 |
| Heart Disease, 1 | Strumous abscess, 1 |
| Senile Decay, 3 | Suicide, 1 |

The average age of the men at death was 50.07, and of the women 53.3.

No epidemic has occurred during the year, and I found very few patients confined to bed. There were only two patients in the male hospital—one suffering from consumption, and the other from a small anthrax—and in the female hospital there were also only two patients confined to bed.

ENNIS
ASYLUM

Sick.

Although the atmosphere was cold and damp, no fires were lighted even in the hospitals, and I have to express the strong opinion that at this season of the year good fires should be maintained throughout the asylum, and that the hospital temperature should not, if possible, be allowed to sink below 60° Fah. I annex for the information of the Board of Governors the coal issue for the week ending the 11th inst., from which it appears that, out of a total issue of 6 tons 12 cwt. and 4 stone, only 16 cwt. was actually used in maintaining the heat of the divisions, the bulk of the remainder being consumed in the engine-house, in the manufacture of gas, and in the different administrative departments. A step has been taken in the right direction in supplying means for heating artificially six single rooms off the hospital, on each side, for one of the first essentials in the present day for every public institution is to have it heated throughout, and this applies especially to institutions for the insane, and to a country like Ireland where the damp is so great, even though the actual temperature is not frequently very low. Doubtless it is the amount of moisture in the air which explains the high mortality from phthisis throughout Ireland, a mortality nowhere more marked than in our lunatic asylums.

Heating.

The asylum continues crowded, and the dayroom accommodation is utterly inadequate, while the Guardians of the Ennis Union by a resolution adopted on the 14th of last June, in effect call on the Governors to withdraw the lunatics, eighteen in number, detained in the workhouse under the provisions of section 9 of 38 and 39 Vic., cap. 67. The Guardians admit that lunatic accommodation is insufficient, and they state that further accommodation should be provided in the lunatic asylum. The workhouses all through the county of Clare contain large numbers of lunatics and idiots, who need skilled attendance, and special care. The detention of some of these patients in workhouses is not strictly legal. It would, in my opinion, be prudent for the Governors, in considering the extension of their asylum, to make provision for all the insane poor in the district whose condition can in any way require asylum treatment. I am of course aware what a heavy tax the increase of lunacy imposes on the ratepayers of the country, and I am glad that a Bill now before Parliament proposes considerably to extend the period of repayment, and so reduce the annuity which Asylum Districts have to pay in respect of their building loans.

Overcrowding.

The food supplies were examined, and found to be good. The milk showed the almost incredible return of 17 degrees of cream, and the bread baked in the asylum, was of good quality. I trust the Governors will, as has been done in many other districts, approve of the substitution of tea for cocoa at supper. Tea is in this age particularly grateful to the patients, and the difference in cost between it and cocoa is, I believe, practically nil. I think the Governors should also allow a small quantity (even half an ounce) of butter for breakfast on Sundays. In this way it might be possible to curtail the somewhat large extra dietary, and so avoid distinctions which possibly may appear to some of the patients to be invidious.

Dietary.

ENNIS
ASYLUM.

The following is the Table of employment :—

| Employment. | — | Males. | Females. |
|--|---|--------|----------|
| Assisting attendants in wards, | | 23 | 16 |
| As garden or field labourers, | | 48 | - |
| As farm servants, | | 3 | - |
| As messengers, | | 1 | - |
| As storekeepers, | | 1 | - |
| As stokers, | | 2 | - |
| As tailors, | | 3 | - |
| As bakers, | | 2 | - |
| As shoemakers, | | 4 | - |
| As painters, | | 1 | - |
| As slaters, | | 1 | - |
| In the kitchen, | | - | 1 |
| In the laundry, | | - | 42 |
| In officers' quarters, | | - | 3 |
| At needlework, | | - | 29 |
| At knitting, | | - | 59 |
| At spinning, | | - | - |
| Miscellaneous, | | 10 | 4 |
| Total, | | 119 | 136 |

It will be seen from this return that only 27 of the female patients are unemployed, and the neat and tidy appearance of these patients reflects great credit on the asylum management.

Staff.

On the male side it is most essential that the Governors should at once appoint a Head Attendant. So far as I am aware, there is no other public asylum in the United Kingdom without such an officer, and it is almost inconceivable in an asylum of the size of Ennis how discipline can be maintained, or medical orders carried out, in the absence of a Head Attendant. The Governors should also consider the utility of adding a painter to the staff; inquiry will, I think, satisfy them of the desirability of adopting this course.

Books.

The books were examined, and, except the omissions relating to restraint and seclusion to which I have referred, were found to be fully posted.

Amusements.

Due attention continues to be given to the patients' amusements.

Divine service.

The Chaplains' books show that 103 men and 112 women attended the Roman Catholic Divine Service last Sunday, while at the Protestant Divine Service 3 men and 6 women were present.

The Resident Medical Superintendent continues to spend much of his time in the institution, and to show a zealous and intelligent interest in its working.

16th November, 1893,

ENNIS DISTRICT LUNATIC ASYLUM.

ENNIS
ASYLUMRETURN of coal issued during the week ending the 11th November,
1893.

| | Cwts. Sts. | | | Cwts. Sts. | |
|-------------------------|------------|---|-----------------------------|------------|---|
| Kitchen, | 8 | 6 | Shoemakers' workshop, . . | 1 | 2 |
| Laundry, | 3 | 6 | Board room, | 1 | 2 |
| No. 1 Division, . . | 2 | 4 | Clerks' office, | 2 | 4 |
| No. 2 " | 2 | 4 | Hall and visiting room, . | 1 | 2 |
| No. 3 " | 2 | 4 | Res. Med. Superintendent, * | 7 | 4 |
| No. 4 " | 2 | 4 | Head nurse, | 2 | 4 |
| No. 5 " | 2 | 4 | Storekeeper, | 2 | 4 |
| No. 6 " | 2 | 4 | Land steward, | 2 | 4 |
| Male night attendant . | 1 | 2 | Gatekeeper, | 2 | 4 |
| Female night attendant, | 1 | 2 | Engine house, | 70 | 0 |
| Tobacco' workshop, . . | 1 | 2 | Bakery, | 7 | 4 |

Total, . . . 5 tons 12 cwts. 4 sts.

ENNISCORTHY DISTRICT ASYLUM.

ENNISCORTHY
ASYLUM.

This asylum has now on its books the names of 404 patients, 227 males and 177 females, the estimated accommodation being for 181 males and 150 females. Unfortunately as yet the proposed alterations and additions have not been carried out.

Inspected on
22nd Dec.,
1893.

The institution has been suffering for many months past from one of perhaps the greatest misfortunes that could befall an establishment of the kind, viz. :—the falling short of the water supply; the drought of the past season having reduced the wells on which the asylum depends to the very lowest level, so the washing, bathing, and flushing the sewers were almost impossible. No greater calamity than this is conceivable in an institution where cleanliness has to be considered before all things. It is, however, some satisfaction to know that the difficulty is now almost past, that the wells are beginning to rise, and that sufficient water is now obtainable. I trust, however, that the troubles through which the institution has passed will not be forgotten, and will be turned to good account in the future, and serve as an incentive to all engaged in the management of the institution, to use every effort to obtain a more satisfactory supply—a supply which will be ample for all the wants of the institution during the very driest season.

Having regard to the very great difficulty in obtaining water in the past, every excuse must be made for any shortcomings as regards the cleanliness of the wards, and of the patients' persons, or clothing. When it is considered how large a consumption of water is required for the daily service of an asylum, it is a matter of surprise how this institution has come through the ordeal so safely as it has.

EXHIBITION
ASYLUM.

The following changes have taken place amongst the patients since the 1st January, 1893 :—

Statistics.

| | Male. | Female. | Total. |
|-------------------------------------|-------|---------|--------|
| On Register at that date, | 228 | 174 | 402 |
| Admitted since, | 49 | 33 | 82 |
| Discharged recovered, | 30 | 21 | 51 |
| Discharged unrecovered, | 1 | 6 | 7 |
| Died, | 17 | 8 | 25 |
| On Register, 22. 12. '93, | 227 | 177 | 404 |

showing an increase of four inmates during the year.

Deaths.

Of the deaths, eleven were the result of brain disease, eight were due to consumption and other chest affections, none were due to violence or accident, and in no case was a Coroner's inquest considered necessary. Only one *post mortem* examination is recorded. In the absence of an Assistant Medical Officer it is, of course, impossible to expect that these important examinations can be carried out.

Restraint and seclusion.

The returns of restraint and seclusion show that sixteen persons were restrained on 1,240 occasions; 948 of these entries refer to the use of gloves by night in the treatment of three patients to prevent their tearing their bed clothes. On my visit I found one man in bed with muffs on his hands to prevent his tearing off some surgical dressing.

Clothing.

More care would be required on the part of the male attendants as regards the dress of the male patients; some of their clothes were shabby, and some of the more troublesome patients were not as tidy as they ought to be. One excitable woman I saw without shoes or stockings, otherwise the dress of the women was neater than that of the men. The material used in the clothing has been improved, as the frieze formerly in use for the men's suits is by degrees being replaced by more suitable stuff, and serge is now being introduced for the women's dresses instead of linsey.

Bedding.

The bedding is ample in quantity, and, considering the great difficulties which have been experienced in washing, it was fairly clean.

Heating.

I must reiterate the remarks made in previous reports with regard to the very low temperature maintained in the wards. On my visit the day was very wet, so that the interior of the building looked damp and cheerless, especially in the back wings where the walls were running with water, and the floors wet, yet throughout the male side there were very few fires to be seen in the grates. The Governors are anxious to introduce a system of artificial heating, and it is to be regretted that up to this it has been found impossible to have the work carried out. I quite allow that it is impossible to heat such an institution properly by open fires, but, until an effective system of heating has been obtained, I think that good fires should be kept burning throughout the corridors. Great expense is gone to to house and feed

the insane, with equal reason should they be kept warm. Even putting aside the comfort of the patients, and having regard to the building only, I think fires should be kept burning to prevent the destruction of the fabric by damp. Even ENDSICOTHY
ASYLUM.

One hundred and twenty men and 138 females are returned as usefully employed. Of the men, 61 work on the farm, 12 are employed as upholsterers, 3 as tailors, 2 as painters, 3 as bakers, and 1 in the carpenter shop. Of the women, 9 wash, and 95 are employed at sewing and knitting. These returns show a very substantial improvement in the number employed at field labour, and speak well for the interest taken by the staff in this important matter. The number of women engaged at washing might, however, be increased with great advantage.

I saw the male patients at dinner in the hall. Some improvement might, I think, be made in the service of the meal. The potatoes should be served in dishes, and not strewn on the table; the knives, forks, and spoons ought to be ready for the patients' use when they come in. Perhaps if the Head Attendant were to see the manner in which dinner is served in some of the larger asylums he might be better able to organise the routine to be adhered to in the issue of the meals. Dinner.

The provisions which I saw appeared to be of excellent quality; the bread is baked in the house, so that the supply is all that could be desired.

During the year the staff, which now consists of 18 men and 12 women, was increased by the addition of one male attendant. The number on the male side would appear sufficient; on the female side the proportion is one attendant to over 12 patients. I am glad to see that on the female side a second night nurse has been appointed; a similar appointment on the male side would certainly be found of advantage. On the morning of my visit the number of wet beds found was six on the male, and eight on the female side; this number, I think, might be decreased. Staff.

On the Sunday preceding my inspection 13 men and 11 women attended the Protestant Service, and 120 men and 63 women were present at Mass. Divine Service.

The books and registers are carefully kept, with the exception of the Medical Journal. As this book is prescribed under the provisions of the 8th and 9th Vic., cap. 107, section 25, a form will be sent from the Lunacy Office, and will, I am sure, be carefully written up for the future. Books.

Every effort appears to be made to provide for the recreation of the patients. In addition to the band there is a weekly dance, and various entertainments, such as theatricals, organised by the Medical Superintendent and his friends, or by the staff; conjuring entertainments given by strolling players, excursions on the river, and in addition from 60 to 75 patients are occasionally sent to various amusements outside the asylum. Amusements.

29th December, 1893.

KILKENNY
ASYLUM.Inspected on
20th October,
1893.

KILKENNY DISTRICT ASYLUM.

I visited this day the Kilkenny District Asylum, and saw all the patients now resident. The following table gives the changes of population since the last inspection :—

| | Male. | Female. | Total. |
|---------------------------------------|-------|---------|--------|
| On Register, 17th August, 1892, . . . | 174 | 156 | 330 |
| Admitted since, | 41 | 34 | 75 |
| Total, | 215 | 190 | 405 |
| Discharged recovered, | 16 | 14 | 30 |
| Discharged unrecovered, | 9 | 9 | 18 |
| Died, | 11 | 7 | 18 |
| Total, | 36 | 30 | 66 |
| Resident at this date, | 179 | 160 | 339 |

The condition of the patients at this date was as follows :—

| | Males. | Females. | Total. |
|--------------------------------|--------|----------|--------|
| In bed, | 9 | 5 | 14 |
| In seclusion, | — | — | — |
| In restraint, | — | — | — |
| Wet last night, | — | 1 | 1 |
| Raised by attendant, | 8 | 14 | 22 |
| On parole :— | | | |
| Beyond grounds, | — | — | — |
| Within grounds, | 30 | — | 30 |

Restraint.

I am glad to be able to state that in this Asylum it has been found practicable to totally dispense with mechanical restraint in the patients' treatment, and that as regards seclusion, only 14 patients have been locked in their rooms during the past fourteen months.

Deaths.

There has been little sickness, and no serious epidemic since last visit. Eleven male and 7 female patients have died, the causes of death being as follows :—

| | |
|---|----|
| Phthisis (consumption), | 8 |
| Heart disease, | 3 |
| Liver disease, | 2 |
| General paralysis of the insane, | 1 |
| Senile decay, | 1 |
| Epilepsy, | 2 |
| Exhaustion attending mania, or melancholia, | 4 |
| Acute meningitis, | 1 |
| Acute meningitis following abscess in ear, | 1 |
| Total, | 18 |

The average age of the men at death was 50·09, and of the women 48·14 years. KILKENNY
ASYLUM.

Unfortunately Dr. Myles, the zealous Resident Medical Superintendent, was invalidated on the date of my visit, but I had the advantage of his *locum tenens*, Dr. Ternan's company in going through the house. I am glad to be able to state that I found it perfectly clean throughout, markedly so on the female side, where the neatness of the dormitories and the manner in which the epileptic beds and wire mattresses were kept, reflects great credit on the Head Nurse. General
condition.

The new buildings and alterations referred to in our last report are in progress, and will, when completed, meet the overcrowding and many serious requirements in the Institution. One of the greatest of these is the want of kitchen accommodation, and cooking appliances, as a consequence of which the patients' dietary is in some respects perhaps the most meagre asylum dietary in the United Kingdom. On no less than four days out of the seven the patients' dinner consists of dry bread and cocoa. As a temporary expedient, and without waiting the completion of the kitchen, the Governors might usefully add to each patients' dinner on those days a little fresh butter, an article of dietary which supplies such a large amount of fat in an easily digestible form. New buildings
in progress.
New kitchen
required.
Dietary.

The return of employment is as follows :—

Employment.

| | Males. | Females. |
|--|--------|----------|
| Assisting attendants in the wards, | 29 | 23 |
| As garden, or field labourers, | 61 | - |
| As tailors, | 3 | - |
| As shoemakers, | 1 | - |
| As painters, | 1 | - |
| As joiners, | 3 | - |
| In the kitchen, | 3 | - |
| In the laundry, | - | 32 |
| In officers' quarters, | 1 | 2 |
| At needlework, | - | 39 |
| At knitting, | - | 29 |
| Drill class, and various, | 53 | - |
| Total, | 155 | 150 |

I found no less than 73 of the female patients crowded into the hospital airing court. The larger airing court has been taken up by the structural changes, and the hospital grass plot, the only remaining airing court, is altogether too small for the number of female patients. There were some cases of contagious ophthalmia (fortunately of a mild type), among them, and this is a disease whose contagious properties are greatly increased by overcrowding.

The quantity of land under spade cultivation during the past year has been 10 acres 2 roods and 37 perches, but about 4 acres of this

**KILKENNY
ASYLUM.**

land, at the rear of the Institution, will not be available in future owing to the building of the new Roman Catholic Chapel, and the other structural extensions.

New farm.

The Governors should consider whether they should not now take up the new farm in whole, or in part, and devote it to the patients' employment and recreation, for which purposes it was purchased. The dispute which unfortunately arose between the Board of Control and the Governors, concerning the acquisition of this land, has happily terminated. Whether the Board of Control was at the time right or wrong now matters very little, but what counts for much, in my opinion, is the patients' welfare and comfort.

Having regard to their increased numbers, and the necessity which has arisen in connection with the new buildings to use up part of the land formerly available for tillage, I feel convinced the Governors will share the opinion that in order to provide sufficient land for the patients' use, the time has now come to encroach on the new farm. Every other Board of Governors in Ireland is, I may safely state, anxious to extend the boundaries of their estates, and some of them are willing to pay largely for the acquisition of additional land. I do not, however, wish to dwell on this matter, as I trust I can leave it with perfect confidence to the Governors' good sense and intelligence.

I regret to miss on this visit the kindly presence of Dr. Lyster, the Consulting and Visiting Physician, in whose place the Governors have determined, in accordance with the provision of the Privy Council Rules, to appoint an Assistant Medical Officer.

Divine Service.

The patients receive spiritual consolation from the Chaplains of their different denominations, whose books show that last Sunday (October 23rd), 114 Roman Catholics, 60 men and 54 women—and 9 Protestants, 7 men and 2 women—attended Divine Service.

27th October, 1893.

**KILLARNEY
ASYLUM.****KILLARNEY DISTRICT ASYLUM.****Inspected on
19th October,
1893.**

There are on the books of this Asylum 453 patients, 271 men and 182 women. Notwithstanding the extensive additions which have been lately carried out, the male side may be now said to be practically full, as, with the exception of the detached hospital, containing 22 beds, which is at present kept unoccupied in order to meet any outbreak of infectious disease, there are only three vacant beds in the main building.

**Increase in
admissions.**

On looking at the statistics of the Asylum it would appear that since 1880 the male admissions have gradually increased from 34 in that year to 66 in 1892, and the number of men remaining at the end of these years from 193 to 268. As it cannot be doubted that the same rate of increase of the insane inmates of this institution will continue for many years to come, it will be necessary for the Governors, at no distant date, to consider the question of providing additional accommodation.

Since the 1st January, 1893, the following changes have taken place amongst the patients :—

KILLARNEY
ASYLUM.

| | Males. | Females. | Total. |
|----------------------------------|--------|----------|--------|
| On Register, 31st January, 1893, | 238 | 172 | 410 |
| Admitted since, | 53 | 52 | 105 |
| Total, | 311 | 224 | 535 |
| Discharged recovered, . . | 17 | 20 | 37 |
| Discharged unrecovered, . . | 6 | 10 | 16 |
| Died, | 17 | 12 | 29 |
| Total, | 40 | 42 | 82 |
| On Register at this date, . . | 271 | 182 | 453 |

As regards the causes of death, in only one case did the Coroner consider it necessary to hold an inquest. In this case the patient, who was of strongly suicidal tendency, and in weak health, is said to have gone into the closet, and as he did not re-appear the attendant went to look for him, and found him sitting on the closet, but life was extinct. On examination a slight mark was found on his neck. The medical evidence showed that death was not due to strangulation, but to failure of the heart's action. The jury, therefore, returned a verdict of death from syncope.

I see no reason to dissent from this verdict; an attempt at strangulation would appear to have been made from the mark on the neck, but the effort brought on failure of the heart's action, which proved fatal. I would only suggest that in the future in the treatment of actively suicidal patients, "caution cards" should be issued to the attendants in whose charge the patients may be, directing that under no circumstances should the person named therein be allowed out of sight.

The remaining deaths were due to natural causes, which call for no remark from me. I am sorry, however, to see that only one post mortem examination has been held. These examinations are now so much the rule in similar institutions, and have proved such important safeguards in treating the insane, that I trust every effort will be made to increase the number held here, especially as the medical staff has been now strengthened by the appointment of an assistant medical officer.

I found on visiting the wards that nine men and twelve women were Sick patients, confined to bed, principally from chronic disease.

The only accident recorded would appear to have been the dislocation of the hip in a feeble old patient.

Restraint is recorded to have been used in the treatment of four, and Restraint, seclusion in three cases.

KILLARNEY
ASYLUM.General
condition of
patients.
Employment
for excitable
cases.

Clothing.

Bedding.

Employment.

Alterations
and improv-
ments.

Water supply.

Disposal of
sewage.Assistant
Medical
Officer.

Staff.

I saw all the patients, both males and females; the men were fairly quiet and well behaved, but there was some excitement amongst the more troublesome women.

Every effort should be made by the staff to afford some employment, such as washing, for this class, as occupation would do more than any thing else to improve their habits and conduct.

The clothing of both men and women appeared to be of good quality, and the patients were fairly neat and tidy in their appearance; the bedding is sufficiently warm, but more attention should, I think, be paid to the condition and cleanliness of the linen, and to the making of the beds.

As regards employment, 42 men are now engaged at farm work and 11 in assisting the artisans. This shows great improvement as compared with the number returned in the last Annual Report, but a greater proportion could still be usefully employed if the area of the farm was increased. I cannot too strongly urge on the Governors the importance of taking steps to acquire additional land. Coming, as the patients do in this institution, from an agricultural district, no employment can suit them so well as farm work. Not only would a larger farm prove of use to the insane, but, if properly managed, the proceeds should largely tend to decrease the cost of the establishment.

Various alterations and improvements have been carried out. Apartments have, during the past year, been prepared for the Assistant Medical Officer. Stores have been set apart for the Matron, and several of the dayrooms have been enlarged and improved by the removal of old and useless walls. It is to be hoped that Dr. Griffin will be able to make the same improvement in some of the other dayrooms. Much plastering has been done, but many of the old walls still remain to be so treated. I would suggest that the most economical way of carrying on this work would be to add a plasterer to the staff, who would employ some of the patients to assist him. The supply of water is now reported as sufficient for the requirements of the institution, the Town Commissioners having, I am happy to say, been able to increase the amount of water to such an extent that Dr. Griffin states he has no further cause of complaint, thus putting an end to a difficulty which so long perplexed the Board of Governors and the Board of Control.

As regards appliances for use against fire, both internal and external hydrants are now provided.

The difficulties with respect to the disposal of sewage have been removed by an agreement with the Town Commissioners, who have undertaken to construct a drain from the asylum to join one of the street sewers, thus doing away with the repeated complaints of the nuisance caused by the cesspool at the rear of the asylum building.

During the past year the office of Assistant Medical Officer has been created, to which post Dr. Edward Griffin has been appointed. The careful records now kept of the various cases under treatment show the great utility of the office, and the efficient manner in which the duties are performed.

At present 17 men, and 14 women are in constant charge of the insane, giving a ratio of attendants to patients of one to sixteen on the male, and of one to thirteen on the female side. This ratio would ap-

pear to be below the usual standard in public asylums on the male side, but the number of artisans employed must in a great degree make up for any deficiency. I would, however, ask the Governors to consider the advisability of increasing the night staff by the appointment of at least one additional attendant on each side. The Governors must see that it is impossible for one man to look after 270 patients, and for one woman to attend to the wants of 180 female lunatics—to nurse the sick, and to improve the degraded habits of those requiring attention. I think the Governors for their own protection should take immediate steps to make more adequate provision for the care of the patients during the night, as in the event of any accident occurring it would be impossible to defend so weak a staff.

The provisions which I saw would appear to me of fair quality, with Provisions. the exception of the milk, of which complaints continue to be made. This is a further reason for obtaining additional land, so that the milk supply should be obtained from the asylum farm.

The Chaplains' books show that on the Sunday previous to inspection Divine Service. 59 men and 44 women were present at Mass, and that two men and one woman attended the Protestant worship.

The statutory books and records are carefully kept, and, as I have Books. already stated, the histories of the various cases are recorded.

26th October, 1893.

LETTERKENNY DISTRICT ASYLUM.

LETTER-
KENNY
ASYLUM.

This asylum was last visited on the 29th Dec., 1892.

The principal object of my visit to-day is to inquire into an outbreak of typhoid fever which up to this has attacked fourteen persons—eight female, three male patients, two nurses, and one male attendant. The first case (a female) is recorded in the medical journal on the 19th July, and the last is stated to have shown pronounced symptoms on the 18th instant. Unfortunately no notes, giving details of the various cases, have been kept. As there is no assistant medical officer attached to the asylum, it is impossible to expect that the Medical Superintendent could find time for such records. Some of the cases have been of a severe type, with high temperature, hæmorrhage, etc., but all are now doing well, and no death has taken place.

Inspected on
25th August,
1893.

Outbreak of
Typhoid fever.

Although the female side of the house has suffered more severely than the male, still the disease would appear to have attacked all parts indiscriminately, and in no part of the institution can the disease be said to have been especially concentrated.

There would appear to be no difficulty in assigning a sufficient Water and cause for the outbreak of the epidemic, as not alone is the water of drains. doubtful quality, as shown by an analysis made by Professor Hodges, but during the time of the first appearance of the disease the supply was inadequate to meet the requirements of the institution. The drainage, also, owing to the want of water for flushing purposes, must be looked on as a further fruitful source of infection, especially as the greater number of the drains have not been relaid since the opening of the institution, and their proper ventilation must be considered a matter of great doubt. It is proposed, amongst the alterations and additions about to be carried out, to introduce a new system of sewerage, with proper

LISTER-
KENNY
ASYLUM.

ventilation, and to remove the sewage tank to a greater distance from the asylum.

Plans for the water supply will be laid before the Governors at their next meeting, and it is to be hoped that no further delay will take place in carrying out this work, so much required for the safety of the institution and for the health of its inmates.

Proposed
additions.

Tenders have also been at length obtained for the various structural alterations and additions, and will also be considered at the next meeting of the Board.

I understand that, owing to the difficulty of obtaining building material in the immediate neighbourhood, the cost of these works will necessitate a greater outlay than was at first proposed. I trust, however, that it may be possible to come to some arrangement so that no further delay may take place in carrying into effect these plans for the accommodation and treatment of the insane of this district.

I saw all the patients in their wards. Since last visit, the following changes have taken place:—

| | Males. | Females. | Total. |
|--|--------|----------|--------|
| On register 29th December, 1891, . . . | 273 | 126 | 409 |
| Admitted since, | 48 | 35 | 83 |
| Total, | 321 | 171 | 492 |
| Discharged recovered, | 17 | 6 | 23 |
| Discharged unrecovered, | 9 | 5 | 14 |
| Died, | 19 | 14 | 33 |
| | 45 | 25 | 70 |
| On register at this date, | 276 | 146 | 422 |

Deaths.

No autopsies.

The deaths call for no special reference; all were from natural causes. No coroner's inquest was held, nor was a *post mortem* examination made in any case. This is to be regretted, as the importance of these examinations for the protection of the insane, who are unable to tell their sufferings, and who show no physical signs of the injuries which they may have sustained during life, is now universally admitted.

However, without a second resident medical officer, work of this kind cannot be expected.

Restraint and
seclusion.

Since the last visit, restraint has not been used, and only one patient has been secluded on one occasion for a few hours.

Escape.

One male patient escaped, and was absent from the Asylum for one night before being re-captured.

Sick patients

Nineteen men and twenty women were found in bed from bodily disease, a larger proportion than is generally found in Irish asylums. This may be explained partly by the epidemic of typhoid fever, but even deducting the cases suffering from this disease, the proportion of sick to the general population is large.

Clothing.

The clothing of the patients on both sides appeared to be fairly good. Frieze, however, is still utilised for the every-day clothing of the men. In weather such as the present, this material must be intolerably hot, and it is at all times unsuitable for indoor wear, is untidy, and not economical.

The women are somewhat improved in appearance, and more suitable material has been obtained for their dresses, and more trouble is evidently taken in cutting out, and fitting them. I hope, however, that farther steps will be taken to improve the condition of the patients, especially in the infirmary dayroom, where they seem still to require more careful supervision.

LETTER-
KENNY
ASYLUM.

I found the Asylum generally in good order, the wards clean, and the beds and bedding well attended to. General condition.

Awaiting the various alterations which will interfere more or less with the greater part of the Institution, it would be of course useless to go to a great trouble or expense in painting or decorating, but much has been already done in some of the female corridors to render them more cheerful by colouring the walls in bright tints, and by the supply of cheap curtains, flowers, ferns, &c.

A considerable increase has taken place in the employment of the patients. Exclusive of those assisting the attendants, 90 men and 76 women are engaged in some form of useful industry. Sixty-eight of the men now work on the land, and from the published accounts it would appear that the farm has proved a source of profit. I can only express a hope that in the near future the Governors will take steps to enlarge its area. Employment.

Great attention appears to be given to the amusement of the patients. Since my last inspection a large number of patients were sent to a circus performance in the town. Two theatrical representations were given in the asylum. A weekly dance and country walks have taken place every week. Amusements.

It would appear from the Chaplains' books that on the Sunday previous to inspection 108 men and 54 women attended Mass, 27 men and 15 women were present at the Episcopalian worship, while 17 men and 6 women attended the Presbyterian service. Divine Service.

The Governors have lately increased their staff by the appointment of an additional female attendant. Staff.

The ratio of attendants to patients on the male side is of course becoming gradually lower. However, until additional accommodation is provided, no room can be found for a larger staff. The night staff consists of only one attendant on each side—a number quite inadequate to attend on so many patients during the long hours of the night. I cannot too strongly impress on the Governors the importance, for their own protection in the event of any accident taking place, of making more adequate provision for the care of the insane during the night. Furthermore I find that no means exist for checking the watchfulness of the night attendants, and I would urge on the Governors the necessity of obtaining some form of tell-tale clock, as otherwise it is impossible for Dr. Moore to satisfy himself that the night attendants are awake.

I understand that the difficulty of obtaining suitable candidates for vacancies on the female staff, and of retaining the services of useful nurses after appointment still continues. The scale of wages on both sides of the institution have been lately considered by the Governors, but I fear that it will be necessary to render the service in some way more attractive, so as to obtain more suitable applicants as vacancies occur on the female staff, as so much of the success of the institution depends on the class of persons in charge of the insane inmates.

I examined the various books. No case-book is kept, but the other Books, books appear carefully written up.

1st September, 1893.

LIMERICK
ASYLUM.

LIMERICK DISTRICT LUNATIC ASYLUM.

Inspected on
15th and 17th
Nov., 1893.

I visited this Asylum on the 15th and 17th November and saw all the patients then resident.

The changes which have taken place among the Asylum population since last inspection are as follows:—

| | Male. | Female. | Total. |
|---------------------------------------|-------|---------|--------|
| On Register 5th November, 1892, . . . | 279 | 266 | 545 |
| Admitted since, ' | 78 | 55 | 133 |
| | 348 | 321 | 669 |
| Discharged recovered, | 32 | 16 | 48 |
| Discharged unrecovered, | 6 | 7 | 13 |
| Died, | 18 | 28 | 46 |
| On Register at this date, | 294 | 270 | 564 |

Overcrowding. This Table shows an increase of twenty-eight patients in the gross number resident since my last visit of inspection a year ago. That the house is now full to overflowing is indicated in various ways, additional beds having been placed in the dormitories, and rooms intended for day occupation having been converted into sleeping accommodation. To meet the very serious overcrowding which exists, the Governors have proposed to add a third storey to a wing on each side, Nos. 4 and 5, to divert the Medical Superintendent's rooms into patients' accommodation, and to acquire other premises outside for a residence for the Medical Superintendent. These proposals are now under the consideration of the Board of Control, but, apart from whatever decision that body may come to, I consider it would be very desirable for the Board of Governors to appoint a sub-committee to confer with my colleagues (who has such a thorough knowledge of the Asylum, and retains an undiminished interest in its working), the Consulting Architect of the Board of Control (Mr. Ussher Roberts, C.E.), and myself as to how best and most economical changes can be made in the existing building in order to provide improved and additional accommodation for the increasing number of the insane. Some parts of the Asylum, such as the observation dormitories, which accommodate forty-seven patients on the male, and forty-three on the female side are of unequalled excellence in our Irish Asylums, and the Governors may proudly point to them as an example of what can be done by assisted and well-directed Asylum labour. On the other hand, although the most has been made of them, the corridors and single rooms in the basements (No. 1) which are partly underground, are so cheerless, and damp, and cold, that they can scarcely be considered as affording suitable habitation for insane patients.

Improvements. The present Resident Medical Superintendent, following in his predecessor's footsteps, is carrying on, or contemplating various structural improvements, such as the removal of flags from the corridors, and the

substitution of stained and polished pine flooring, also the improvement in light and ventilation, and general comfort of the single rooms opening off these corridors. The Governors must, however, bear in mind that work of this character, carried out by patients' labour, even when assisted from outside, is necessarily very slow in its progress, and can scarcely be expected to overtake the expanded wants of an institution such as the Limerick Asylum, in which the number of patients has so materially increased during the past decade.

LIMERICK
ASYLUM.

The dress of both sexes was sufficient, but the necessity of wearing out the old stock of clothing rather detracted from the general appearance of the men. Certainly the personal cleanliness and neatness of the women conveyed to me the impression that more attention was in their department given to these important matters than on the male side of the Asylum.

The Asylum records show that the condition of the patients was, on the first day of my visit, as follows:—

| | Male. | Female. | Total. |
|-------------------------------|-------|---------|--------|
| In Bed, | 4 | 8 | 12 |
| In Seclusion, | - | - | - |
| In Restraint, | - | - | - |
| Wet last Night, | 6 | 2 | 8 |
| Reled by Attendant, | 13 | 6 | 19 |
| On Parole:— | | | |
| Beyond Grounds, | - | - | - |
| Within Grounds, | 135 | 191 | 326 |

The male hospital accommodates 41 patients. The seven single rooms of this division have been completely renovated by Dr. O'Neill. The windows have been lowered and enlarged, new shutters have been put up, a gas bracket has been placed over each door, a new fireplace has been put in the corridor, which, like the rooms, has been boarded in pinewood. These rooms are, however, unheated, and this leads me to say, that it was evident to me, sufficient firing was not at the time of my visit being kept up throughout the male side of the asylum. The weather was rather cold, and the heating appliances were not in use, and no fire was lighted even in the male hospital ward, notwithstanding the presence in it of at least one case of acute disease. In consequence of this absence of firing, the entire male side seemed to present a somewhat cold and cheerless aspect.

The temperature of the male hospital at 9 A.M., on the day of my visit, was 49°. I found it in No. 8 division, with the windows closed, 44°, while I read temperatures as low as 42° recorded in this division in the beginning of the month. During this same period the temperature of the coldest corridors in the Limerick Prison was scarcely allowed to sink below 50°. There is nothing more important than an equable temperature for the health and contentment of the insane, and all their living rooms should in this damp climate be maintained at a genial temperature; certainly not less than 55° Fah. I feel convinced that

LIMERICK
ASYLUM.

the Resident Medical Superintendent will take steps to prevent any future complaint about fires, yet, I think, the Governors should authorize the extension of the system of artificial heating (already, in part, introduced) throughout the entire building.

Staff. The changes in the staff call for no remark except the retirement of the clerk after a prolonged service.

Laundry. One of the best departments in the Asylum is the laundry, notwithstanding that it is structurally out of date, and has but little modern machinery.

Thirty-nine women are daily employed in it, and about 7,000 pieces are washed every week, and sent out in a way which reflects great credit on the laundress and the Asylum administration.

Female hospital. I found in the female hospital 38 patients, 6 of whom were in bed. The single rooms of this division opening off a flagged corridor are dark and unheated, except from the corridor fireplaces, but the Resident Medical Superintendent proposes to improve them as he has done in the corresponding rooms on the male side.

Accidents. Two accidents of a serious character have been entered in the register of accidents since last visit—one a case of self-mutilation, and the other a case of fracture of a rib from a fall against a bath.

Restraint and seclusion. The number of entries in the Register of Restraint and Seclusion is 90. These refer to the restraint of 2 persons and the seclusion of 13.

The restraint used was gloves. The number of patients who have escaped since the 5th November, 1892, and have been absent for at least one night before being brought back are 2.

Deaths. Forty-four deaths—16 men and 28 women—have occurred since last visit. Seven of the patients were admitted during the present year. The causes of death were as follows:—

| | |
|--|----|
| Phthisis (Consumption), | 8 |
| Heart Disease and Heart Failure, | 11 |
| General and Senile Debility, | 19 |
| Brain Disease, | 12 |
| Epilepsy, | 1 |
| Apoplexy, | 2 |

Autopsies. The deaths call for no comment, except to notice the unusually large proportion of fatal cases of heart disease. In seven instances the cause of death was verified by *post-mortem* examination. The average age of the men at death was 51.18, and of the women, 49.9.

Employment. I found all parts of the Asylum clean, and the sanitary conditions of the patients since last inspection have been favourable. The table of employment is satisfactory. The large number of patients usually employed in the different workshops again calls for special commendation.

Dinner. Dinner took place during my inspection, and I saw the patients in the dining hall. The dinner consisted of Irish stew.

The impression received from my visit was, on the whole, exceedingly favourable, and in going through the divisions I noticed many improvements and repairs which have been executed by patients' labour since my last inspection.

LIMERICK
ASYLUM.

In the absence from regrettable illness of Dr. O'Neill, Dr. O'Mara, the Assistant Medical Officer, accompanied me through the Asylum, and I am glad to be able to bear testimony to the very favourable impression which his intimate knowledge of the patients' mental and physical condition and his sympathetic manner made on me. He seems to have imbibed the spirit which, for many years, has characterized the staff of the Limerick Asylum, a spirit of kindness and sympathy for the afflicted class of human beings which constitutes the population of the Asylum.

I examined all the registers and found them duly posted. A record Books of the patients' histories is now kept in the Case-book by the Assistant Medical Officer.

The recreation and amusement of the patients receive due attention. Amusements.

The Chaplains' Books show that, on the Sunday previous to my inspection, 100 males and 77 females attended the Roman Catholic, and 6 males and 11 females, the Protestant Divine Service. Divine Service.

24th November, 1893.

LONDONDERRY DISTRICT ASYLUM.

LONDONDERRY
ASYLUM.

The numbers resident on this date are 216 men and 198 women, — total 414. In addition, two males and six females are boarded out under the provisions of 38 & 39 Vic., cap. 67, section 10, the former at the Derry, and the latter at the Limavady Workhouse.

Inspected on
11th Sept.,
1893.

As yet no decision has been arrived at as regards the accommodation for the insane poor of the district—whether to obtain a new site and build a new asylum, or to enlarge the present buildings. Whatever plan is adopted a large expenditure of public money must be made. The Governors therefore feel it their duty to carefully weigh the various schemes so as to ensure that the outlay shall be to the best interest of the ratepayers on the one hand, and of the lunatic population on the other. The questions involved, of weighty interest to the district, may safely be left to the Board of Governors, composed of men of such business capacity, and imbued with so much sympathy towards the insane. Additional accommodation

The overcrowded state of the Institution, therefore, still continues, as there is at present only space for 344 by night and 396 by day. The limited accommodation outside is even more apparent, as no matter how great the desire may be to allow the insane liberty, extended exercise, and employment in the open air, the small piece of ground provided necessitates that the patients should, even when taking exercise, be crowded together, and the position of the pleasure grounds surrounded by houses, necessitates that they should be always under the public gaze. The farm only provides employment to a limited number in cultivating vegetables. Overcrowding.

LONDONDERRY ASYLUM. Since the 28th December last, the admissions, discharges, and deaths, have been as follows:—

Changes.

| | Males. | Females. | Total. |
|------------------------------------|--------|----------|--------|
| On Register at that date | 228 | 206 | 439 |
| Admitted since, | 46 | 37 | 77 |
| Discharged, recovered, | 19 | 12 | 31 |
| Discharged, unrecovered, | 7 | 5 | 12 |
| Died, | 19 | 22 | 41 |
| Resident, 11th September, 1893, | 318 | 204 | 422 |

- Deaths. This shows a diminution of seven patients, principally due to the number of deaths which have been more numerous than usual. The high death-rate is not, however, caused by any outbreak of zymotic disease, but is due principally to diseases of the lungs; seventy-five per cent. of the deaths are recorded as caused by some form of disease of the respiratory organs. Up to this, in thirteen cases the cause of death has been verified by *post-mortem* examination. This is a most gratifying evidence of what can be done by the energy and determination of the medical staff.
- Autopsies.
- Restraint. One patient has been restrained on eight occasions to prevent self mutilation.
- Accidents. Four accidents are recorded, viz. :—A fracture of one of the bones of the foot, of the thumb, of one of the bones of the nose, and of a rib.
- Behaviour of patients. Much improvement has taken place in the behaviour of the patients. The men were perfectly quiet and well-behaved, and amongst the women there was very little noise or excitement; much less than might have been expected considering the very limited space provided for out-door exercise. Of the appearance of both men and women I can speak in the highest terms; due attention is paid to the neatness and tidiness of the clothing, and on the female side a great improvement has been made in the cutting-out and fitting of the dresses; their hair also is neatly arranged. It is wonderful what an effect these small matters have on the conduct and contentment of the insane. The linen, both on the patients and on the bedding, is clean, and well looked after. A number of new beds and hair mattresses are by degrees being introduced, and I hope in time to see the straw ticks entirely done away with, as they are not alone dangerous in case of fire, but dirty and costly.
- Clothing.
- Bedding.
- Dayrooms. The day-rooms present a bright and cheerful appearance, and by degrees many additions are being made to the furniture and decorations of these rooms; a number of additional chairs, curtains, and couches have been obtained, and the corridors are made bright with pictures and plants. Some of the single rooms have been plastered since I was last here, and much painting, papering, and decorating of the day-rooms and corridors has been carried out by patients' labour. A few of the old windows have been lowered, and fitted out with new sashes. The water-closets on the male side, lately provided with new closets, has
- Sanitation.

greatly improved the sanitary condition of the Institution. But much remains to be done in this way, as all the water-closets throughout the Institution require to be similarly re-modelled.

LONDONDERRY
ASYLUM.

The mortuary has been enlarged and newly fitted up, and forms a great addition to the usefulness of the Institution by providing the means of carrying out pathological work. A building of the kind is now considered a necessary part of an asylum, tending to satisfy the general public that proper attention is paid to the dead.

As regards employment, thirty-six men are engaged on the farm, as many as the limited area of land will afford work for; four patients work with the tailor, three with the shoemaker, two with the mason, three with the carpenter, and four as painters. I would suggest that one of the attendants should be taught upholstery, so that additional employment may be afforded in making mattresses. This is a most useful trade for the insane, as it tends greatly to economy in the supply of bedding, and gives a great deal of work which can be done by many of the patients who would be unfitted for other employment. In the laundry thirty women are at work; this department is too small for the work of the Institution; if it were large I dare say a much greater number of patients could be got to employ themselves in washing. I would suggest that at the present time a room should be provided for the reception and distribution of the clothes. This can, I think, be done without difficulty or expense, and would greatly facilitate the work of the department.

I saw the patients at dinner, and was much pleased to notice that due attention is paid to decency and order in the service of the meal. The dinner consisted of bacon and cabbage, and was much relished by all.

All the articles supplied by contract appeared of proper quality.

No alteration appears to have been made in the numerical strength of the staff, or in the scale of wages. On both sides the attendants appear a respectable body. Especial pains are taken by the medical superintendent to instruct them in their work; each nurse takes duty by turn in the hospital, and receives special training in sick nursing, the result being that bed sores are unknown. I must also again refer to the night staff. Two attendants do duty on each side, and their duties are so well carried out that only one wet bed is reported in the morning on the male side, and none on the female. When referring to the staff I might suggest, for the consideration of the Governors, the advisability of providing quarters outside the asylum for as many of the male attendants as can be spared by night from the wards, so as to obtain the space now occupied by them for the use of the patients.

The Chaplains' books show that on last Sunday—

Divine Service.

90 men and 61 women attended Mass;

33 men and 44 women were present at the Episcopalian service;

and

44 men and 43 women attended the Presbyterian service.

The number of men attending the Protestant worship in comparison to the number of females would appear to be small.

LONDONDERRY
ASYLUM.
Books.

The following books are now kept by the medical staff:—

- (1.) Case-book, giving most copious and careful details of the medical history of each case. Amongst the notes of each case is a photograph of the patient, a most important and useful adjunct to the records, showing the changes made by mental disease on the human face.
- (2.) Pathological book, giving the notes of each *post-mortem* held.
- (3.) Epileptic record, giving a return of the number of fits for each day.
- (4.) Record of restraint and seclusion.
- (5.) Medical Journal.

These records show that the medical staff are alive to the necessity of keeping pace with the study of psychological medicine now being carried out in many of our public asylums.

18th September, 1893.

MARYBOROUGH DISTRICT ASYLUM.

MARY-
BOROUGH
ASYLUM.

Inspected on
on 2nd Oct.,
1893.

Sanitary
condition.

The condition of this Institution has been the subject of much consideration for some time past, and has been frequently reported on, both by the Inspectors and by the Board of Control.

Early in the year an outbreak of dysentery took place, attacking about 30 patients, and ending fatally in seven cases. We reported to the Board of Governors that this outbreak was due to the defective sanitary arrangements. The Board thereupon called on Messrs. Maguire and Sons to examine and report on the state of the drains. This report was of so alarming a nature that the Board of Control were compelled, under the obligations placed upon them by the provisions of the existing law, to take immediate steps to remove the sources of danger which threatened the health of the establishment. The existing water-closet and drain pipes in immediate connection with the building were removed, and temporary earth-closets erected in their stead. On these latter the establishment has to depend until the internal closets are re-fitted, and the drainage system re-laid.

This presents great difficulties owing to the impossibility of obtaining any outfall except into the stream running through the land. To pollute this stream would be prejudicial to the public health, and would be illegal under the Public Health Act. To get over the difficulty, the Governors have suggested that the earth-closet system should be made permanent. I would only ask any of the Governors who adhere to this opinion to inspect the temporary earth-closets at the present time. They are now used simply as privies, as it was found to be too much trouble to fill the boxes overhead. I was informed that the excreta are sometimes covered with earth underneath, but the clay which I saw in use was so wet as to be useless as a deodoriser. Only two methods, therefore, would appear to be feasible, viz. :—Purification—(1) by chemical action, (2) by filtration on land. To carry out the second method would

necessitate the acquisition of a piece of land on the opposite side of the road. It is unnecessary, however, to point out the advantages to be gained by this method—

MART-
BOROUGH
ASYLUM.

First.—The sewage would become a source of profit to the Institution.

Second.—Additional employment would be provided for the inmates.

Not alone has the sanitary condition of the Institution been a source of Overcrowding anxiety, but its overerowed condition, and the necessity for immediate action to provide additional accommodation has been a subject of deep consideration, and has been frequently reported on by the Inspectors, by the Architect to the Board of Governors, and by the Consulting Architect to the Board of Control. According to the report of Mr. Drew, the Governors' Architect, the Asylum has only space (according to the scale laid down throughout the United Kingdom) to accommodate 176 inmates by day, and 352 by night, whereas there are 425 patients resident at the present date. So great is the overcrowding that the male patients will be obliged to sleep during the coming winter in the flagged passages. In August plans, prepared by Mr. Drew, supplying the necessary accommodation, were forwarded by the Board of Control for the consideration of the Board of Governors. The following resolution was, however, sent in reply :—

"The Board are not disposed at present to enter into such great expense, viz.:—£17,000 in making the alterations and additions suggested by the architect by his plans placed before the Governors this day. They are content, however, to erect a temporary hospital for immediate requirements, and order.—That tenders be advertised for immediately."

We trust, however, that this is not the final decision of the Governors, and that they will again take the matter into consideration, as it cannot be supposed that the erection of a temporary detached hospital, built for the purpose of meeting an outbreak of contagious disease, though a most useful adjunct, will in any way meet the requirements of the Asylum.

The Board of Control are anxious to be supported by the Governors, and to have their concurrence in every step which may be taken to supply the required accommodation. It must be remembered, however, that the Treasury pays about half of the cost of maintenance of the inmates. Can it be supposed that their Lordships will continue to contribute to the support of these patients for whom proper accommodation is not provided?

The sketch plans placed before the Governors merely suggested how the accommodation might be provided, but the Board of Control are anxious to meet the Board of Governors, and to discuss with them the most suitable and most economical manner of carrying out the work, and if the Board of Governors have any suggestions to make, the Board of Control will be most happy to consider them most carefully. For this purpose, I would ask that a Committee should be appointed who would confer with the Inspectors and the Consulting Architect to the Board of Control.

MARY-
BOROUGH
ASYLUM.

Since the beginning of the year the following changes have taken place in the Institution :—

Changes.

| — | Males. | Females. | Total. |
|------------------------------|--------|----------|--------|
| Resident, 1st January, 1882 | 197 | 206 | 403 |
| Admitted since, . . . | 60 | 36 | 96 |
| | 257 | 241 | 498 |
| Discharged, recovered, . | 15 | 10 | 25 |
| Discharged, unrecovered, . | 10 | 10 | 20 |
| Died, | 10 | 18 | 28 |
| | 35 | 38 | 73 |
| Resident at this date, . . . | 222 | 203 | 425 |

Deaths.

Of the deaths :—

| | |
|----|--|
| 10 | were due to Phthisis and other chest diseases, |
| 7 | " Dysentery, |
| 2 | " Cancer, |
| 4 | " Brain disease, |
| 2 | " Old age, |
| 1 | " Kidney disease, |
| 1 | " Syncope, |

and in one case death was due to burning, the patient's room having caught fire. This latter case was investigated at the time, and a report made to the Governors, on which they have taken such action as will, I trust, render a repetition of such a calamity impossible. No other serious accidents are reported. In three cases the cause of death was verified by *post-mortem* examination. It is to be hoped, taking into consideration the very great importance of these examinations in public asylums, and having regard to the strength of the medical staff, that every effort will be made where possible to verify the cause of death.

Autopsies.

Restraint and
seclusion.

At the time of my visit, no patients were under restraint, or in seclusion, and from the records it would appear that no patient had been restrained, while 23 had been secluded on 45 occasions.

Condition of
patients.

I saw the male patients at dinner in the day-room. I cannot report favourably on their appearance; their faces were unwashed, their clothes were untidy, unbuttoned, torn, and shabby. Neither is the bedding on this side of the house properly attended to, the sheets on many of the beds were soiled, and the presses in which the linen should be stored were untidy, and filled with rags and cast clothing. In one of the dormitories I found the floor stained, and was told that this was due to the use of a night bucket. Such utensils ought to be unknown in asylums of the present day.

Defect due to
male
attendants.

This state of things, although allowance must be made owing to the difficulties caused by overcrowding, and the want of proper baths and lavatories, is, in my opinion, due to want of attention on the part of the male attendants, and I am the more convinced of this from the condition of the female wards; there the patients are decently dressed, clean, and tidy in their appearance.

I would, therefore, ask the Governors to take steps to render the male staff more efficient. In the first place, as pointed out in a previous report, the number of attendants is not sufficient, the proportion being about one attendant to 18 patients, whereas the ratio should be one to Staff.

11. Secondly, the Head Attendant does not appear to me to be qualified for so responsible a post. I think he would do better in his original post of Charge Attendant, and I would suggest that a Head Attendant should be obtained from some other asylum, with more experience of discipline and order. This, of course, could only be done by raising the salary and emoluments of the office to the rate of wages paid to Head Attendants elsewhere, so as to attract suitable candidates.

I see that the Board are about to consider a scale of wages for their night staff. I am certainly of opinion that if trained attendants are to be obtained, it will be necessary to offer a salary of not less than the maximum sum mentioned in the notice. Wages of night staff.

In making these suggestions, I would not wish to be considered unmindful of due economy, but the Governors must be aware that they cannot expect to have capable attendants unless they are reasonably paid.

9th October, 1893.

MONAGHAN DISTRICT ASYLUM.

MONAGHAN
ASYLUM.

Since the Institution was last visited, the question of providing additional accommodation, and of rendering the administrative departments capable of meeting the requirements of the number of patients, has been frequently under the consideration of the Board of Governors. In order to accommodate the increasing number of the insane in the district, it was proposed, instead of adding to the existing institution, to separate the County of Cavan from Monaghan, and to erect an asylum for that County. At a conference held at the Office of the Board of Control, at which representatives of the Board of Governors and the Town Commissioners of Cavan attended, the whole matter was discussed, and it was decided to have a comparative statement prepared, showing the cost to the ratepayers (1) of the necessary alterations and additions to the present asylum; and (2) of the erection of a new asylum for the County Cavan.

Inspected on
17th March,
1893.

Increased
accommoda-
tion.

The plans and estimates were prepared by the Architect of the Board of Governors, and a comparative statement made out by the Board of Control, showing that the erection and maintenance of a second establishment would entail an outlay much in excess of that involved in the enlargement of the existing institution. It has, therefore, been now decided to carry out the plans originally proposed by the Board of Control for the extension of the asylum, so as to render it capable of meeting all the wants of the district. We have, therefore, every hope that no further delay will be met with in carrying out these plans, as the overcrowding, and consequent difficulties and dangers in the administration, are every day increasing. Asylum to be enlarged.

It is unnecessary to dwell on the requirements of the institution, which have been so frequently reported on, and of which the Board of Governors are so well aware. Suffice it to say, that the overcrowded

MONAGHAN
ASYLUM.

Detached
buildings
suggested in
event of out-
break of an
epidemic.

state of the house is evident in every department, and must seriously interfere, not alone with the management of the establishment, but with the health of the inmates.

It may, therefore, be well for us here to call the attention of the Governors to the danger which would accrue in so large an institution in the event of an outbreak of any epidemic. Serious warnings are given of a visitation of cholera during the coming summer. We must, therefore, strongly urge on the Governors at once to make provision for isolation in the event of any outbreak of the kind. Two detached buildings already exist which might be used as hospitals, but these contain a large number of insane inmates, whom it would be impossible otherwise to accommodate under existing circumstances. We would, therefore, suggest the erection of one or two wooden huts, capable of accommodating about a dozen patients, so as to cut off the infected cases in the event of an outbreak of cholera, or any similar disease.

The asylum contains at present 326 men, and 255 women; total, 581. This shows an increase of 34 since the beginning of last year.

Whilst we were in the wards the patients were quiet and well-behaved.

Zymotic
disease.

During the past year two or three cases of typhoid fever have appeared, and several patients have been attacked with erysipelas, of which one woman died, and at the present time two women are suffering from this disease, pointing to the possibility of some insanitary condition existing in these wards.

Deaths.

With the exception of the one death already referred to, the mortality during the past year appears to have been due only to ordinary causes, and calls for no remark. No record is found of any accident or injury of a serious nature.

Restraint and
seclusion.

Restraint and seclusion appear to have been resorted to on sixty-nine occasions. These refer to the restraint of thirteen persons, and the seclusion of twenty-five.

Clothing.

No change would appear to have been made in the clothing of the male patients—frieze jackets and waistcoats are still worn. Tweed might be substituted for frieze with advantage, as it would be found to be as serviceable, more suitable for general wear, cleaner, tidier, and, we believe, more economical.

The female patients were fairly neat in their personal appearance.

Bedding.

The bedding is sufficiently warm, and each bed is now supplied with a pair of sheets; these are only changed once in three weeks. It is said that the linen cannot be changed more frequently, owing to the inadequacy of the laundry to meet the requirements of so large a number of patients. The washing-room of the laundry is certainly not large enough to afford room for the number of patients who ought to be employed in it, and in any proposed additions this ought to be borne in mind, and the room increased to at least double its present size. It must be remembered, however, that few asylums in this country have so much machinery for washing, and that there are three laundresses employed. We are, therefore, of opinion that with more energy on the part of the staff, and a little more attention on the part of the matron, a much larger supply of clean linen ought to be turned out every week.

Laundry.

Employment.

The returns of employment show that ninety-seven male patients are employed on the farm; four with the tailor; three with the shoemaker;

two with the painter; and six with the mason. Forty-eight female patients work in the laundry; fifty-seven sew; and twenty-five knit.

MONAGHAN
ASYLUM.

We would again urge on the Governors the consideration of the question of adding to the farm attached to the asylum, so as to supply more adequate employment for the large number of working patients at present in the asylum, by this means affording the most important factor in the treatment of those patients for whom hopes of recovery remain, and giving health and comparative happiness to many patients whose disease is incurable. Further than this, additional land should certainly tend to a decrease in the cost of maintenance, and therefore should entail no additional burden on the ratepayers. We understand that land could easily be obtained adjoining the existing farm.

More land
necessary.

The following alterations have been made in the staff:—

Staff.

The office of head attendant has been created instead of that of house steward. A painter, one male, and two female attendants have been added to the staff. The number of attendants in actual charge of the insane now number twenty-two males and twenty females, giving a proportion of one attendant to fifteen patients on the male, and one nurse to thirteen patients on the female side.

We see from the minutes that complaints of inattention to duty have been made against the Matron by the Medical Superintendent. As a Committee of the Board of Governors have inquired into these charges, it was unnecessary for us to do so. We trust, however, that the Board of Governors will take into consideration the whole question of the supervision of the female wards, the kitchen, laundry, and work-rooms.

Matron's
duties.

It would appear to us impossible in so large an institution that one official could properly supervise all these departments. In English and Scottish asylums the work is divided between a head nurse and a house-keeper, who give up their whole time to the supervision of the female staff, and the management of these various sections of work.

The night staff consists of two attendants on each side. On the morning of our visit the number of wet beds found were twelve on the male, and nineteen on the female side. We must repeat the remarks made in last report as to the importance of setting apart a dormitory for the supervision of the suicidal and epileptic. No excuse can exist for not doing so in this asylum, as two very fine dormitories have been built for this very purpose, fitted with appliances for constant supervision, so that in the event of any accident taking place through want of proper supervision, the responsibility must rest with the asylum staff.

Night staff.

The Chaplains' books show that on the Sunday previous to inspection 191 men and 157 women attended Mass; 53 men and 43 women attended the Protestant Service; and 44 men and 34 women were present at the Presbyterian Worship.

Divine Service.

The books and registers were examined, and found correctly kept.

Books.

24th March, 1893.

MULLINGAR
ASYLUM.

MULLINGAR DISTRICT ASYLUM.

Inspected on
28th Dec.,
1893,
—

I visited Mullingar Asylum on the 28th December, 1893, and saw all the patients then resident. I had interviews with four patients who complained of unjust detention. One of them did not, in my opinion, need asylum treatment, and Dr. Finnegan, acting on my advice, discharged him a few days later. The other cases did not, I considered, call for interference on my part.

The following table shows the changes which took place among the asylum population from the 3rd August, 1892, to the 28th December, 1893:—

| | Male. | Female. | Total. |
|--|-------|---------|--------|
| On register, 3rd August, 1892, | 378 | 248 | 626 |
| Admitted since, | 109 | 86 | 195 |
| Total, | 487 | 334 | 821 |
| Discharged recovered, | 47 | 60 | 97 |
| Discharged unrecovered, | 20 | 10 | 30 |
| Died, | 37 | 36 | 73 |
| Total, | 104 | 96 | 200 |
| On register at this date, | 383 | 238 | 621 |
| Absent on probation, | — | — | — |
| Absent on pass, | 2 | 2 | 4 |
| Absent by escape, | — | — | — |
| Resident at this date, | 381 | 236 | 617 |

From these figures it will be seen that the steady increase in the number of patients under care and treatment has been stayed, at least temporarily, while the recovery rate during 1893 rose to 54·6 per cent. on the admissions. It has been laid down as an axiom that any proportion of recoveries in Lunatic Asylums much over 45 per cent. may be regarded as high, but the conditions which affect the termination of mental disease, whether in recovery or death, are so variable—conditions such as age, sex, form of disease—and Lunacy Statistics, even without any dishonest intention, lend themselves to such easy distortion, that it would be quite unfair to necessarily connect the proportion of recoveries or deaths with the excellence, or otherwise, of the management of an asylum. As an illustration of the fallacy likely to occur from considering figures apart from their controlling circumstances, I may mention that the death rate is almost invariably higher in English than in Irish public asylums, one explanation being, not that our treatment is better, but that some of the most fatal forms of mental disease, such as general paralysis of the insane, and epilepsy, are so much more common there than here. Of the Mullingar statistics I would only remark that I believe them to be perfectly honest, and that no attempt is made to “cook” them in any way so as to shadow forth more favourable results than those actually attained.

General
condition of
patients.

It is quite impossible to visit this asylum without being struck by the marked absence of excitement among the patients, and by the air of contentment and industry which pervades the whole establishment and

which, doubtless, largely accounts for the patients' tranquillity. One gentleman, officially connected with another asylum, lately asked if there was anything peculiar to the insane inhabitants of the district that they should be so much better behaved than those he was elsewhere familiar with.

I found all parts of the asylum clean, and in good order. It has been found possible to practically dispense with all restraint and seclusion.

Excitable patients are put to bed, or if necessary into padded rooms; Restraint and in practice there has been no case of restraint, and only twenty instances of seclusion during the period under review.

There are no airing courts, and the patients are permitted an amount of liberty which reflects the very greatest credit on the asylum administration. It is true that nine patients escaped, and were absent for short periods during the year 1893, but such occurrences are not, except in the case of patients dangerous to themselves or others, now regarded as having any special importance, and indeed may be to some extent regarded as a proof of the reality of the liberty accorded to the patients.

The food is of excellent quality, carefully cooked, and neatly served, while the patients' clothing is very satisfactory, special attention being given to the fit and neatness of the women's dress.

Another marked feature of the Mullingar Asylum, on which it is always a pleasure to dwell, is the employment of the patients. The extent to which this most beneficial and successful method of treatment is carried, is shown by the following Table :—

TABLE OF EMPLOYMENT.

| | Men. | Women. |
|--|------|--------|
| Assisting attendants in the wards, | 49 | 48 |
| As garden or field labourers, | 51 | - |
| As farm servants, | 5 | - |
| As clerks, | - | 1 |
| As messengers, | 3 | - |
| As stockers, | 5 | - |
| As tailors, | 3 | - |
| As shoemakers, | 6 | - |
| As upholsterers, | 17 | - |
| As painters, | 4 | - |
| As joiners, | 5 | - |
| As plumbers, | 1 | - |
| As masons, | 2 | - |
| In the kitchen, | 13 | 5 |
| In the laundry, | - | 46 |
| In officers' quarters, | 3 | 4 |
| At needlework, | - | 51 |
| At knitting, | - | 17 |
| At mat making, | 4 | 6 |
| Other employments, | 132 | 9 |
| Total employed, | 323 | 217 |

MULLINGAR
ASYLUM.

The following is a return of clothing, bedding, &c., made by the patients during the year ended 31st December, 1893:—

| Articles. | Number. | Articles. | Number. |
|-----------------------------------|---------|----------------------------|---------|
| Sheets, | 1,595 | Dresses, | 351 |
| Bolsters and pillows, | 119 | Pejtiocoats, | 290 |
| Hair mattresses, | 116 | Shifts, | 303 |
| Bolster and pillow slips, | 1,008 | Aprons, | 1,485 |
| Gutta percha sheets, | 114 | Stockings, | 369 |
| Straw bed cases, | 150 | Bibs, | 60 |
| Coverlets, | 13 | Men's blouses, | 60 |
| Jackets, | 294 | Table cloths, | 102 |
| Vests, | 251 | Mattress cases, | 152 |
| Trousers, | 414 | Night wrappers, | 100 |
| Drawers, | 99 | Bolster cases, | 50 |
| Shirts, | 1,114 | Buckets, | 57 |
| Socks, | 1,117 | Door mats, | 19 |
| Boots and shoes, | 667 | Kneelers, | 19 |
| Neckties, | 1,519 | Clothes baskets, | 15 |
| Suspenders, | 334 | Bed baskets, | 60 |

The female attendants' uniform and under-clothing, and also the male attendants' under-clothing, are made in the workroom. Two pair of boots for male and female attendants (annually) are made in the shoemakers' shop; general repairs carried out for male and female attendants, and patients in the workroom, tailors' and shoemakers' shops.

It may be remarked that a considerable number of the patients unsuited for outdoor work, are taught useful trades or occupations in the asylum workshops. At the present time there are 11 tailor and 5 shoemaker apprentices—all interested in their new occupation, and all feeling that they are no longer useless burthens on their fellow men.

Additional
land.

The question of the utility of acquiring additional land for dairy purposes is now under the Governors' consideration. Having regard to the high price paid for milk (one shilling per gallon), it would seem likely that in Mullingar, as elsewhere, the acquisition of a sufficient quantity of dairy land at a reasonable price ought to prove a source of profit to the funds of the institution, while it certainly would afford fresh outlets of interest and employment to many of the patients, and so enter largely into their curative treatment. In Scotland the asylum estates—models of good and successful management—are in many instances worked as large farms, while in that country field and garden labour are considered the very best employments for the insane. The average extent of land attached to District Asylums in Scotland is not far from 200 acres, while the new asylums are provided with even larger estates—as Gartlock 347 acres, and Hartwood 606 acres—asylums, it should be added, intended to accommodate a much smaller number of patients than Mullingar.

Deaths.

Of the 73 deaths (37 men and 36 women) which occurred between

August, 1892, and December, 1893, 16 are returned as resulting from cerebral and spinal diseases, 4 from heart disease, 3 from general or senile debility, 1 from typhoid fever, 1 the result of accident, and 3 from abdominal affections. The remaining cases are registered as resulting from general tuberculosis, or its localised form known as consumption, in 30 instances, while pneumonia or lung disease accounted for the remaining 14 cases. In every possible case the cause of death has been verified by *post-mortem* examination, and in this connection I have to ask the Governors' attention to the unsuitability of the present mortuary, and to its objectionable situation.

MULLINGAR
ASYLUM.

The very high mortality from consumption and other chest affections needs the Governors' careful attention, as the statistics of the past year in this regard are but a repetition of those of previous years. Doubtless, many of the phthisical patients are predisposed by inheritance to that disease, while the dampness of the climate favours its development, but phthisis is now-a-days considered to be, to some extent, a preventable disease in public institutions, and I think it likely that the existence of a wet subsoil under the asylum buildings, and deficient interior heating and drying of the air, are to some extent responsible for the frequency of phthisis and other lung diseases. The expenditure on fuel is undoubtedly liberal, yet, owing to the absence of any system of artificial heating, the recorded temperatures in the different divisions are not infrequently very low, while the extensive development of green mould on the back walls is a proof of the dampness of the entire building. Another cause favouring the development of disease is the overcrowding on the male side, which, with proper dormitory accommodation for 318, and dayroom space for 336, actually contains at the present time 383 patients, while on both sides there is a want of modern hospital accommodation. It is most desirable that the Governors should take these matters into consideration, that they should press for the artificial heating of the asylum, that new floors should be laid down where necessary, as in the main corridors, and that these should be kept stained and varnished, and cleaned afterwards by dry rubbing, instead of the present system of cleaning with soap and water.

Mortality from
pulmonary
diseases.

Dr. Finnegan has tried to meet the want of proper hospital accommodation by adapting a portion of the male side as an infirmary division, which has been placed in charge of an attendant and his wife, and which is now occupied by forty feeble and consumptive patients.

Many additions and alterations have been recently carried out, including a very complete system of baths, and it is particularly gratifying to be able to state that many of the structural repairs and improvements have been effected, in whole or in part, by asylum labour.

Additions and
alterations.

Complaints have been made during the past year by Boards of Guardians and other public bodies of the high rate of maintenance in this asylum. The explanation is, partly, that the contract prices are high, and, to some extent at least, that the Resident Medical Superintendent has undertaken, by the application of asylum labour, and in the common interest alike of patients and ratepayers, much work which in other Irish asylums is entirely defrayed out of Treasury Loans. If the expenditure be admittedly high, there is no evidence, at least within my knowledge, of any unjustifiable extravagance, and the Governors share with the Resident Medical Superintendent the credit of having raised

Rate of
maintenance.

M 4

**MULLINGAR
ASYLUM.**

their asylum into a high place among Irish public institutions. Much still remains to be done, but at least the Governors have shown an intelligent and most willing liberality,

**Contrast
treatment of
pauper insane
with that of
ordinary
pauper.**

It is now recognised in every civilised country that the treatment of the insane poor should run on different lines to that of the ordinary pauper. The latter can only expect the minimum of comfort, and treatment necessary to preserve his physical and mental health, while the insane pauper, like a patient in an ordinary hospital, may reasonably look for everything that tends to alleviate his mental sufferings—everything that tends to dispel those clouds of melancholy or passion which so often render the lives of the insane miserable, or prompt them to deeds of violence or self-destruction. Unfortunately this modern management of lunatic asylums, and the moral and humane treatment of the patients, entail a heavy cost on the contributory ratepayers. In even comparatively recent times, when lunatics were chained and manacled, or penned in dreary and cheerless airing yards—when even the most violent were terrorised by brutal ill-treatment—when their food was the coarsest, and their clothing the scantiest—the expense of buildings and maintenance was necessarily not very great. Now the patients in a well-managed asylum lead a comparatively free and open air life; they are comfortably fed, and housed, and clothed, while it is recognised that their chances of recovery largely depend on the humanity and personal qualities of a trained and intelligent staff of officers and attendants. Speaking of this modern asylum treatment, and the uselessness of drugs in the treatment of mental disease, it has been recently said by a distinguished physician :

“The Superintendent is your medicine, the staff is your medicine, the nurses are your medicine, your conservatory and your entertainments, your birds, your garden, and your farm are your medicines.”

These, however, mean a liberal expenditure on a class which can contribute little towards its own support.

Fortunately we cannot as a nation be accused of want of sympathy or generosity, and therefore I feel assured that the ratepayers, when they understand the object, will not grudge any reasonable expenditure in promoting the recovery, or alleviating the sufferings of a most helpless and afflicted class.

Overcrowding. I would suggest that the Governors should appoint a small committee to confer, at the asylum, with a sub-committee of the Board of Control, as to how the overcrowding and the remaining structural requirements of the institution can be best and most economically provided.

Books. I examined all the statutory books and found them duly posted.

Divine Service. The numbers attending Divine Service on the Sunday preceding my visit were as follows :—Catholics, 265 men and 156 women; Protestants, 17 men and 7 women; Presbyterians, 10 men and 1 woman.

OMAGH DISTRICT ASYLUM.

OMAGH
ASYLUM.

On my visit of inspection on the 22nd ultimo, I saw all the patients then resident, and at the conclusion of my visit I had a private interview with one patient in the office.

Inspected on
22nd Dec.,
1892.

The following table shows the changes in the asylum population since the last visit of inspection in December, 1892 :—

| | Males. | Females. | Total. |
|--|--------|----------|--------|
| On register, 8th December, 1892, | 319 | 200 | 519 |
| Admitted since, | 113 | 83 | 196 |
| | 432 | 283 | 715 |
| Discharged recovered, | 51 | 27 | 78 |
| Discharged unrecovered, | 26 | 30 | 56 |
| Died, | 28 | 23 | 51 |
| | 105 | 80 | 185 |
| On register at this date, | 227 | 203 | 430 |

I found 31 patients—18 men and 13 women—in bed, many of them suffering or convalescing from influenza of a severe type.

The number of patients who have escaped since December, 1892, and have been absent for at least one night before being brought back, is two.

The number of entries in the register of restraint and seclusion since last inspection is five. These refer to the restraint of two persons, and the seclusion of two. These entries show that mechanical restraint is now seldom resorted to in the patients' treatment. Suitable occupation and amusements are considered the true substitutes for these methods, but it may be occasionally necessary to prevent, by the attendants' interference, a patient injuring himself or others. The attendants should be carefully and systematically instructed in their duties, how important it is that they should not interfere unnecessarily with excited patients, and how, when obliged to manually restrain a refractory patient, they should do so in such a manner as to avoid inflicting either injury or pain.

Restraint and
seclusion.

Excited
patients and
attendants.

I regret to notice that the Board of Governors found it necessary during the year to dismiss an attendant for kicking a patient, and that in several cases charges of violence towards patients were preferred against attendants. The Governors should have no hesitation in dealing with any such case in which the charge has been brought home. The first duty of an attendant is humanity towards the patients, and an attendant who cannot control his temper, however severe the provocation

Dismissal of
attendant.

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he may receive, is (no matter how valuable his services may be in other respects) unfitted for his post, and should not be allowed to remain in charge of the insane.

Accidents.

The number of accidents recorded is again considerable, including two attempts to commit suicide, four cases of fracture, one of wound on the back of the neck, and two of severe contusions. During the present unfortunate state of overcrowding, nothing but the most unceasing vigilance on the part of officers and attendants will prevent such casualties.

Deaths.

The deaths have been 51 in number, 28 men and 23 women, and their causes may be classified as follows:—

| | Males. | Females. |
|--|--------|----------|
| GENERAL AND SPINAL AFFECTIONS:— | | |
| Apoplexy and Paralysis, | 1 | - |
| Epilepsy and Convulsions, | 3 | - |
| General Paralysis of the Insane, | - | - |
| Exhaustion after Mania or Melancholia, | 2 | 2 |
| Organic Disease, | - | 2 |
| Tumours, | - | - |
| THORACIC DISEASE:— | | |
| Consumption, | 5 | 1 |
| Inflammation of Lungs and Membrane, | 2 | 4 |
| Other Pulmonary Diseases, | 2 | 1 |
| Disease of Heart and Arteries, | - | - |
| ABDOMINAL AFFECTIONS:— | | |
| Inflammation of Stomach, | - | - |
| Intestines and Peritoneum, | - | - |
| Disease of Liver and Kidney, &c., | 1 | - |
| Dysentery and Diarrhoea, | 5 | 3 |
| Fever and Erysipelas, | 2 | - |
| Cancer, | - | - |
| Disease of Bones, | - | - |
| General Debility and Old Age, | 5 | 10 |
| Scalds, | - | - |
| Accident, | - | - |
| Total, | 28 | 23 |

The average age at death of the men was 42·8, and of the women 48 years, while the death rate has been a little over 8·3 per cent. on the daily average number resident.

Heating.

Every effort should be made to maintain a genial temperature throughout the asylum by an abundant consumption of coal, until such time as an

artificial system of heating can be introduced. On the female side I found temperatures of 44 to 45 degrees recorded, and in the small dormitory of the old building a temperature as low as 43 degrees.

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ASYLUM.

Fortunately the patients are now in all cases supplied with warm bed-covering; each bed is supplied with three good blankets, under-blanket, pair of sheets, and warm rug. I had blankets weighed in four instances, with the following result:—

| | | | |
|-----------------|---|---|----------|
| No. 1 corridor, | . | . | 15½ lbs. |
| No. 2 corridor, | . | . | 16 lbs. |
| No. 3 corridor, | . | . | 17½ lbs. |
| Epileptic bed, | . | . | 16 lbs. |

while the weight of unwashed blankets on a bed in the dormitory of No. 6 corridor was 13½ lbs.

I need not point out the serious inconvenience which is caused by the over-crowded state of the asylum, how day-rooms and corridors have been converted into dormitories, or the shifts to which the resident Medical Staff is put in order to meet the daily increasing demands on the accommodation. Careful plans were prepared some time ago by the Asylum Architect for the necessary structural alterations and additions. It was found, however, that it was difficult to keep within the limits of expenditure imposed by the Governors' wishes. This has led to frequent conferences between the Board of Control, or rather a sub-committee of that body, and Mr. Owen. The plans have now been cast and re-cast, with a view of reducing the expenditure to the lowest point compatible with providing the necessary accommodation, and they have now been finally revised before submission to the Board of Governors.

In the returns given to me by the Medical Superintendent I find that there are over 60 suicidal men and nearly 90 suicidal women under care. This unusually large proportion of suicidal patients must, I think, be due to the method of classification, that patients stated on the admission form or in the Medical Journal to have evinced any suicidal threat or tendency have been allowed to remain classed under that description, although not now actively suicidal.

The new plans will provide observation wards for epileptics, of which class there are 19 of each sex in the asylum, and for suicidal patients, but the limits of expenditure will prevent those wards accommodating more than a limited number (requiring constant supervision by night and day) of the total number classified as suicidal or epileptic. The Governors should consider the necessity which exists of appointing, at least on the female side, a third night attendant, who would, as far as present arrangements render possible, keep the suicidal and epileptic scattered through the institution under frequent supervision, until the observation dormitories are ready for their occupation. If this is done the Governors will feel that they have done all that is immediately practical in safe-guarding these dangerous patients.

I found, I am glad to state, the patients of both sexes clean in their persons, and tidy in dress, and I observed various improvements in the decoration of the divisions, and in many things contributing to the patients' comfort.

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ASYLUM.

The following table shows the patients employed on the day of my visit :—

Employment.

| | Males. | Females. |
|--|--------|----------|
| Assisting attendants in the wards, | 121 | 65 |
| As garden or field labourers, | 1 | - |
| As farm servants, | 118 | - |
| As storekeepers, | 2 | - |
| As messengers, | 2 | - |
| As tailors, | 4 | - |
| As shoemakers, | 2 | - |
| As painters, | 2 | - |
| As joiners or carpenters, | 1 | - |
| As plumbers, | 1 | - |
| As masons, | 1 | - |
| In the kitchen, | 2 | 3 |
| In the laundry, | 2 | 30 |
| In officers' quarters, | 1 | 4 |
| At needlework, | - | 53 |
| At knitting, | - | 67 |
| | 260 | 222 |

Farm. The farm returns, I am pleased to observe, show a considerable profit, between £500 and £600, for the past year. This result proves even from an economical point the benefit which a large farm confers on a public asylum, but how much greater is the moral benefit it contributes, for does not a sufficient farm mean occupation and contentment to many patients, and actual recovery and restoration to family life for some of these?

Dinner I saw the patients at dinner, and I examined the provisions in store, which seemed to me to be of good quality. The milk showed an average return of 12 degrees of cream.

Books. I examined the books. The Medical Journal is carefully kept by the Assistant Medical Officer, of whose active interest in the discharge of his duties I need hardly remind the Governors.

Divine Service. The Chaplains' Book shows their required attendance.

On the Sunday preceding my visit, 110 men and 100 women were present at Mass, while 32 men and 40 women attended the Protestant Divine Service.

26th February, 1894.

RICHMOND DISTRICT LUNATIC ASYLUM.

RICHMOND
ASYLUM.

I have been engaged during the 18th, 19th, 20th, and 21st instant, in the inspection of this Institution.

Inspected on
18th, 19th,
20th, and 21st
Dec., 1893.

During the course of the year an addition was made to the Medical Staff, which now consists of the Resident Medical Superintendent, three Assistant Medical Officers, and two Clinical Assistants. The third Assistant Medical Officer will also act as Pathologist. In making this appointment the Board of Governors have shown their desire that the asylum should keep pace with the pathological investigations now being carried out in other similar institutions.

On the 1st January, 1893, the patients on the books of the asylum numbered 1,467 (681 men and 786 females); since then 233 men and 252 women have been admitted—85 men and 73 women have been discharged, recovered—69 men and 45 women not recovered—and 54 men and 121 women have died, leaving resident at the present date 1,505 patients (706 men and 799 women).

The patients resident at the present date are chargeable to the different divisions of the district as follows:—

| | |
|--|-----|
| To the County of the City of Dublin, | 678 |
| To the County of Dublin, | 322 |
| To the County of Wicklow, | 130 |
| To the County of Louth, | 112 |
| To the County of the Town of Drogheda, | 33 |

Originally the asylum was supposed to accommodate 1,100 patients, Accommodation and the beds were then apportioned to the contributory areas as follows:—

| | |
|--|-------|
| To the County of the City of Dublin, | 477 |
| To the County of Dublin, | 308 |
| To the County of Wicklow, | 168 |
| To the County of Louth, | 137 |
| To the County of the Town of Drogheda, | 26 |
| | 1,100 |

Having regard, however, to the modern requirements of asylum accommodation, 1,000 would be the number which the asylum should

RICHMOND
ASYLUM.

be considered capable of containing, and the number of beds would then be apportioned as follows :—

| | |
|--|-------------------|
| To the County of the City of Dublin, | 446 |
| To the County of Dublin, | 233 |
| To the County of Wicklow, | 162 |
| To the County of Louth, | 126 |
| To the County of the Town of Drogheda, | 27 |
| | <hr/> 1,094 <hr/> |

It would, therefore, appear from these returns that the extra accommodation to be provided is required almost entirely for the insane poor of the City of Dublin, which has 429 lunatics above its allotted number, without taking into account the insane inmates of the North and South Dublin Unions; Dublin County requiring extra room for 99, while the Counties Wicklow and Louth have beds to spare.

Purchase of
estate for a
second asylum.

Temporary
accommoda-
tion provided.

Repairs
necessary.

Mortuary.

Overcrowding.

As it has been decided to provide additional accommodation for the insane poor of the district, in accordance with the resolution of the Board of Governors of February, 1891, the Board of Control are at present in treaty for the purchase of an estate containing about 500 acres, whereon to erect a second asylum for the district. As some time, however, must elapse before these new buildings can be completed, it was considered necessary, having regard to the very over-crowded and unsanitary condition of the wards, to provide additional accommodation to meet immediate requirements. Accordingly, three wooden dayrooms have been erected, and a fourth is in process of building, affording dayroom space for about 280 patients. A detached hospital has also been built, provided with a disinfecting chamber, and a special laundry, affording beds for 30 patients. This detached wooden hospital is erected for the treatment of infectious disease, but in the absence of any epidemic, and having regard to the very great over-crowding existing in the male hospital, it might be used as an adjunct to this department for the treatment of all cases of very acute disease requiring special nursing and care. For this purpose, I think, a staff should be appointed. Dr. Norman thinks that this might consist of an attendant and his wife, with a trained nurse in charge. This staff could be increased according to the number of patients under treatment.

I must repeat the remarks that many parts of the old building stand sadly in need of renovation. Many of the single rooms would require to be refloored, and the walls should be cemented and plastered. Parts of both houses are much in need of painting. It is proposed to do up some of the female dayrooms, and one was in process of renovation during my visit. So long, however, as the very great over-crowding continues, it is impossible to expect that any extensive improvements can be carried out.

It has been decided to erect a mortuary, post-mortem room, and pathological museum. Such buildings are certainly much required, as the existing accommodation for the dead is most unsuitable, and the room provided for pathological research is insufficient, and unworthy of such an institution.

Although the additional wooden dayrooms will afford some relief to the congestion in certain divisions, in other wards the overcrowding still exists as heretofore. In many of the dormitories numbers of the inmates are obliged to sleep on the floors, and the rooms which are used as

sittingrooms by day must again be utilised as sleeping rooms by night. In the female house it was proposed to remove some of the old, and now useless partition walls and thus obtain additional space. No doubt these alterations would not only afford extra space, but would do much to improve the existing accommodation. It is, however, a question for consideration whether it would be wise to carry out this work at present having regard to the inconvenience which such alterations must cause in the very overcrowded state of the wards.

The Governors have decided to erect a new laundry, kitchen, and stores. For many years past the deficiency of space in these departments, and the dangers and difficulties arising from such insufficient provision for carrying out the work of so large an institution have been constantly brought under notice, and it is to be hoped that this important work will be carried out without further delay. When these plans are being prepared, suitable messrooms and recreation rooms should be provided for the staff, and I would suggest in addition that suitable apartments for the female staff should not be forgotten. I am sorry to say that at the present time the accommodation set apart for the use of these officials is not in accordance with modern requirements, and it is impossible to hope to attract suitable candidates for the female staff, or to retain their services, unless their wants are properly attended to. Separate blocks containing apartments for nurses are now as a rule provided in large asylums. By this means more space is left in the wards for the use of the insane, and the nurses when off duty are able to enjoy the privacy and comforts of a home.

Since the 1st January, 175 patients—54 men and 121 women—have died, giving a percentage of mortality on the numbers in the institution of 7·6 on the male, and of 15 on the female side, that for all Ireland being 7·6 for men and 9·1 for women. The higher death rate in the female house would certainly seem to point to some unsanitary conditions existing in the surroundings of that establishment, and this seems borne out by the outbreaks of dysentery and typhoid fever which occurred in the spring of the year, only four patients in the male house having been attacked by dysentery, of whom one died, while 39 women suffered from this disease, of whom 13 died. Similarly only 4 men were attacked with typhoid, of whom two died, while the number of patients attacked in the female wards was 39, of whom 8 died.

The following is a return of the causes of deaths:—

RICHMOND
ASYLUM.

New laundry,
kitchen, and
stores to be
erected.

Deaths

Zymotic
diseases.

Causes of
Deaths.

| | Male. | Female. |
|--|-------|---------|
| CEREBRAL AND SPINAL AFFECTIONS. | | |
| General Paralysis, | 13 | - |
| Partial Hemorrhage, | - | 1 |
| Bulbar Paralysis, | - | 1 |
| Oedema of Brain, | - | 1 |
| Meningitis, | 1 | - |
| Tubercular do., | 1 | - |
| Epilepsy and Status Epilepticus, | 2 | 2 |
| Acute Ascending Paralysis, | - | 1 |
| Acute Delirious Mania, | - | 1 |

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ASYLUM.

| | Male. | Female. |
|---|-------|---------|
| THORACIC DISEASES. | | |
| Consumption, | 14 | 63 |
| Lobar Pneumonia, | 2 | - |
| Pericarditis, consecutive to, | 1 | - |
| Necrosis of Fifth Left Rib, | 2 | - |
| Pneumonia and Pericarditis, | 1 | - |
| Acute Bronchitis, | 1 | - |
| Chronic ditto, | - | 1 |
| Empyema, | - | 1 |
| Gangrene of Lung, | - | 1 |
| Disease of Aortic Valves, | 1 | 1 |
| Ditto Mitral ditto, | 1 | 7 |
| Ditto Aortic and Mitral, | - | 1 |
| Ditto Tricuspid, | - | 1 |
| Fatty Degeneration of Heart, | 1 | 2 |
| ABDOMINAL AFFECTIONS. | | |
| Dysentery, | 1 | 13 |
| Diarrhoea, | - | 7 |
| Tubercular Enteritis, | 2 | 2 |
| Peritonitis, | 2 | 1 |
| Tubercular Peritonitis, | - | 2 |
| Biliary Cirrhosis of Liver, | - | 1 |
| Interstitial Nephritis, | 3 | - |
| Uræmia, | - | 1 |
| Typhoid Fever, | 2 | 3 |
| General Tuberculosis, | 1 | - |
| Cancer of Larynx, | 1 | - |
| Cancer of Breast, | - | 1 |
| Cancer of Pancreas, | 1 | - |
| Total, | 54 | 121 |
| | 175 | |

Accidents.

The return of accidents of serious nature which happened during the year, are as follows :—

Two fractures of bones from falls in fits.

Two injuries to the forehead, one from a kick, and one from a blow, both inflicted by other patients.

Autopsies.

Autopsies were made in 111 of the 175 deaths, a very high percentage, and one reflecting the greatest credit on the medical staff, showing the interest which they take in pathological study.

I found 28 men and 30 women confined to bed.

During the year the general health of the patients cannot be said to be satisfactory; as I have pointed out, dysentery and typhoid fever appeared in the spring of the year, and a slight outbreak of scarlatina is also reported.

RICHMOND
ASYLUM.

The returns of restraint and seclusion show that 34 patients were secluded on 229 occasions, while restraint has not been used. Three escapes (where the patient was absent all night before being brought back) are recorded.

Restraint and
seclusion.

During my visit I saw every patient, with the exception of one man and two women who were absent on probation. During the past year this mode of discharge has been used in 47 cases, of these 7 were returned within the probationary period; of the others (40), 37 were afterwards certified as recovered, and 3 remained at home though still insane. Such discharges are often of great advantage, affording the opportunity of testing the patient's fitness for life outside the asylum.

Discharges on
probation.

The conduct of the patients during my visit was fairly good. I may here, however, remark that it is unfortunate that many of the dayrooms should contain such large numbers. The collection of so many insane people in the same ward must tend to increased excitement, and must render it difficult for the attendants to have an accurate knowledge of the cases under their charge.

Both men and women were neat and tidy in their persons, and were suitably clothed. The male clothing has been improved by the introduction of gray tweed suits, and flannel underclothing is now provided for all. On the female side the dresses were very neat, and appeared to be made with due regard to personal appearance.

General
condition.
Clothing.

The returns of employment show that 66 men work on the farm, and 35 are engaged at various trades, 27 men and 20 women work in the kitchen, 85 women are engaged in the laundry, and 133 are employed at needlework, while 300 men and 235 women are returned as attending school. These returns show a very low percentage of employment, and I cannot too strongly urge on all connected with the management of the institution the importance of providing additional means of occupation. The very limited area of land renders it impossible to utilise the full number of men who would otherwise find work in this way. Perhaps some scheme could be devised in order to afford occupation in the open air by erecting sheds for sawing wood, breaking stones, and picking hair; nothing would have a more powerful effect in lessening discontent, and diminishing excitement and violence, and having regard to the overcrowded condition of the dayrooms, nothing would tend so much to the health and happiness of the patients.

Employment.

As regards amusements—cricket and football are now carried out with very great enthusiasm since the appointment of Dr. Rambant, who takes a great interest in ministering to the amusement of the patients.

Amusements.

105 inmates now go for extended walks beyond the grounds twice weekly, and 240 patients are returned as attending the associated entertainments held once a week.

Outdoor
exercise.

During the year the staff has been increased by the appointment of four attendants for duty by day, and three for night work. The numbers now consist of 36 men and 46 females for day duty, and 7 men and 12 women for night work. The proportion of attendants to patients for day duty, especially on the male side, is still low, and should by degrees be augmented. A Head Attendant now has charge by night on the male side, but on the female side the arrangement is found impossible owing to the number of detached buildings.

Staff.

The duties of the various officials have been re-distributed, as suggested

RICHMOND
ASYLUM.

in last report. The casting of the male clothing is now carried out by the Head Attendant on the male side, and the two Schoolmistresses superintend the work on the female side, with most satisfactory results, whilst the Schoolmasters assist in the clerical department of the office.

Dinner.

I saw the female patients at dinner. The meal was served in a manner deserving of praise as regards order, regularity, quietude, and attention to decency. I think, however, the enamelled mugs at present in use are very objectionable, as the enamel has worn away, leaving the metal exposed. The dietary has been improved by giving a dinner of bacon or pork twice a week, and it is proposed to introduce a fish dinner on one day. Tea is now given instead of cocoa.

Dietary.

All the provisions which I saw appeared of good quality, with the exception of the bread, and I understand that a contract has been entered into for the ensuing year for bread of a better quality.

Owing to the very deficient storage, great difficulty must be imposed on the Storekeeper in the reception and distribution of the various articles required for the daily wants of the inmates.

Divine Service.

The following is a return taken from the Chaplains' books of the attendance at Divine Service on the Sunday previous to my inspection:—

243 men and 265 women attended Mass;

32 men and 66 women attended the Episcopalian, and 10 men attended the Presbyterian Services.

Books.

I have examined the various books required to be kept up. The Case-books are carefully kept. I think, however, it would render them much more useful if photographs of the patients to whom the notes refer were entered in them.

22nd December, 1893.

SLIGO
ASYLUM.

SLIGO DISTRICT ASYLUM.

Inspected on
16th Feb.,
1893.

On the 16th February, 1893, the Sligo District Lunatic Asylum contained 244 men and 180 women. During the past year the following changes are recorded:—

| | Male. | Female. | Total. |
|--|-------|---------|--------|
| Resident on 1st January, 1892, | 218 | 183 | 401 |
| Admitted since, | 88 | 41 | 129 |
| | 306 | 224 | 530 |
| Discharged recovered, | 25 | 14 | 39 |
| Discharged unrecovered, | 19 | 5 | 24 |
| Died, | 25 | 22 | 47 |
| | 244 | 183 | 427 |

Of these, eight men and seven women are confined to bed from bodily disease, in all cases chronic in character.

No outbreak of zymotic disease has been reported during the year, nor has any serious accident taken place.

The deaths are stated to have been due to natural causes, and in no case has a coroner's inquest been considered necessary.

Only one post-mortem examination has been held. Considering the strength of the medical staff, we cannot but express regret that greater efforts are not made to verify the cause of death whenever possible. The importance of necropsies in public asylums has now been so universally recognised that it is needless for us to point out their utility in protecting the insane against injuries which otherwise would never have been brought to light. Such examinations must also tend to throw light on the study of insanity.

During the year ten patients have been restrained, and thirty-seven secluded on 546 occasions.

Only six attempts at escape are reported, where the patient was absent for one whole night before being brought back.

The patients, during our visit to the wards on the male side, were fairly quiet and well behaved. On the female side there was some noise and excitement.

The outer clothing worn by the men consists of frieze jackets and waistcoats. The substitution of tweed for frieze would be found to be economical, and would certainly be more comfortable and more suitable for ordinary wear. Many of the shirts worn by the working patients were much soiled. The linen is said to be changed once a week on both sides of the house, but this does not meet the requirements of patients employed at outdoor work. The Medical Superintendent complains that it is impossible to provide a sufficiency of clean linen, either for the daily use of the inmates, or for the weekly change of sheets on the beds, owing to the inadequacy of the laundry to meet the wants of the establishment. This is a very serious complaint, and we cannot too strongly urge it on the consideration of the Governors, who must be aware that cleanliness is above all things requisite in the care and treatment of the insane. To render the laundry of the asylum adequate for the work required would involve a very small outlay necessitating only the conversion of a dormitory adjoining the laundry (ill-suited for the use of the insane) into the ironing room, and throwing the present ironing room into the washing room; by this means, and at a very small expense a laundry adequate to the requirements of the institution would be provided. All that is further necessary would be to erect a number of additional washing troughs so as to afford employment for at least double the number of women at present at work. Very little more machinery is required, as some of that at present in use appears to be of modern type, and to do its work fairly well.

Unfortunately we are unable to report that any structural improvements have been carried out during the past year. The overcrowding still continues. The dormitories do not afford sufficient space; so much so that on the male side the corridor is occupied by beds. The day-rooms are quite insufficient for the number of patients at present in the institution. The sanitary accommodation is insufficient; the water-closets are of an old and antiquated pattern; improved lavatories and bathrooms are much required. The female dining-room in the basement is cold and cheerless in the extreme. No means of heating exists except open fire-places. These are few in number, and quite insufficient to raise the temperature in the long corridors and sleeping-rooms. The Governors, we understand, are about to consider tenders for heating the wards. It would, however, appear to us that in the

SLIGO
ASYLUM.

Deaths.

Post-mortem
examinations.Restraint and
seclusion.

Escapes.

Clothing.

Laundry
inadequate.Overcrowding.
Many improve-
ments
necessary.

**SLIGO
ASYLUM.**

first place the various structural alterations so urgently required should be taken into consideration, and we cannot too strongly urge that this should be done without delay. No public asylum in Ireland stands in more immediate need of improvement, and no institution affords greater facilities for extension and improvement at a comparatively small expense. At present a great part of the space is occupied by useless corridors and passages. The removal of the dividing walls would do much to provide the additional accommodation required.

We have tried to meet what we understood to be the Governors' views in not pressing for structural improvements until the asylum loan had been repaid. This has now been done, and the necessary alterations and additions should, in our opinion, be no longer delayed. As the visiting members of the Board of Control, we, and Mr. Usher Roberts, C.B., the consulting architect, are prepared to confer with the Governors or a committee of its members on the asylum requirements, and we can assure the Board that when considering these requirements it will be our most earnest endeavour to avoid involving them in any expenditure which is not absolutely necessary.

Dietary.

The dietary has been improved by giving a dinner once a week of mutton and cabbage, and the food now supplied would appear to be well suited to the requirements of the inmates, as it is of the kind generally in use in the homes of the peasantry of the district. We regret, however, that greater attention is not paid to the service of the meals, so as to teach those habits of regularity, self-control, and decency, so important in the treatment of the insane. At present the food is given to the patients in tin bowls, and eaten with spoons. No knives, forks, delf, or table cloths are provided. We are told that no improvement can be introduced until more commodious dining-rooms have been provided. Every effort should, however, be made to have the meals served more in accordance with modern requirements than at present.

Staff.

During the past year the offices of clerk and storekeeper have been divided, and are now held by two separate officials. This alteration has long been recommended, and will, we feel sure, tend to improvements in administration, and to the economical working of the institution.

A stoker has been added to the artificers, and the office of hospital nurse has been established; such an appointment is a step in the right direction. The improvement of the nursing of the sick in public hospitals now occupies so much attention, that it is time some advancement should be made in the mode of tending the sick and infirm in asylums.

The number of ordinary attendants in actual charge of the insane exclusive of head and night attendants and artisans, amount to twelve on the male and thirteen on the female side, giving a proportion of one attendant to twenty male patients, and one nurse to sixteen female patients, certainly not by any means a high proportion.

Divine Service.

On last Sunday ninety-one men and fifty women attended Mass, while twelve men and nine women were present at Protestant worship.

Amusements.

About fifty patients on an average are stated to attend the associated amusements which are held once a week.

Books.

The books and registers, including the Case-book, are carefully kept.

WATERFORD DISTRICT ASYLUM.

WATERFORD
ASYLUM.

I inspected the Waterford District Lunatic Asylum on the 8th instant, and saw all the patients then resident, and subsequently had a private interview with two of them in the office. The following Table gives the changes which have taken place among the population of the asylum since last visit of inspection in December, 1892 :—

Inspected on
8th Dec., 1893.

| | Male. | Female. | Total. |
|--|-----------|-----------|-----------|
| On Register on 13th December, 1892, admitted since, | 209 48 | 178 30 | 387 78 |
| | 257 | 217 | 474 |
| Discharged recovered, | 31 | 34 | 65 |
| Discharged unrecovered, | 20 | 14 | 34 |
| Deceased, | 51 | 49 | 100 |
| On Register at this date, | 206 | 168 | 374 |

This Table shows that the discharges and deaths during the twelve months have outnumbered the admissions, and that there has been a consequent decrease of thirteen in the number of patients resident. This reduction would, at any time, be satisfactory, but it is especially so at present, when the accommodation is so curtailed, and the administration so hampered by the new buildings, and reconstruction of parts of the asylum now in progress. It would however be, in my opinion, premature to forecast that, as regards the Waterford Lunacy District, the increase of insanity, be it absolute, or be it only relative, is now permanently stayed. In previous years, as far back as 1882 and 1883, there was a nominal decrease in the total number resident during the twelve months, and it is also necessary to bear in mind that there are a large number of the insane relieved in the workhouses of the district, or wandering at large, for many of whom it will be ultimately necessary to find asylum accommodation.

The condition of the patients at the time of my visit was as follows :—

Condition of
patients.

| | Male. | Female. | Total. |
|--------------------------------|-------|---------|--------|
| In bed, | 1 | 1 | 2 |
| In restraint, | - | - | - |
| In seclusion, | - | - | - |
| Wet last night, | 6 | 7 | 13 |
| Banned by attendant, | - | 24 | 24 |
| On parole :— | | | |
| Beyond grounds, | 13 | - | 13 |
| Within grounds, | - | - | - |

The number of entries in the Register of Restraint and Seclusion since the 13th December, 1892, is 490. These refer to the restraint of six persons, and the seclusion of four. The number of patients who have escaped since the same date, and have been absent for at least one night before being brought back, is one.

The deaths on the male side were 20, and on the female side 14. Deaths. These 34 deaths were registered as due in 8 cases to disease of the lungs,

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WATERFORD ASYLUM. in 2 cases to disease of the heart, in 12 cases to diseases of the brain (including epilepsy), in 8 cases to old age and general debility, in 1 case to cirrhosis of the liver, in 1 case to cancer, in 1 case to dropsy, and in 1 case to hernia. The average age of the men at death was 53.35, and of the women 44.4 years. The causes of death are in many cases very carelessly entered. Thus, "dropsy" is not in itself a disease, but a symptom common to many diseases. "Hernia," or rupture, similarly, is not a direct cause of death, although it may become so under certain pathological conditions, such as the protruded gut having its circulation stopped—"strangulated," as such a condition is technically termed.

Books not carefully kept. All records and entries in public institutions are now-a-days properly required to be kept with punctilious accuracy, and I consider that much greater care and neatness are required in posting the Waterford Asylum books and records. No case-book, giving the history and progress of each case, is kept, as in other asylums. Dr. Atkins pleads want of time; no one can doubt his zealous interest in the institution, but the reason he gives for the omission affords a strong argument for the appointment of an Assistant Medical Officer to take charge of the asylum during the absence of the Resident Medical Superintendent, and who, amongst other important duties, is required to record the changes which take place in the patients' mental and physical condition. It is, indeed, impossible to conceive how a public asylum of the size of Waterford can be administered in the best interests of the patients without the Resident Medical Superintendent having the assistance of, at least, one Assistant Medical Officer.

Heating. The establishment throughout was perfectly clean and well-aired; fires were lighted in all the dormitories and day-rooms, and a genial temperature maintained in these rooms, a point of great importance in the treatment and contentment of the insane. It will, however, be necessary for the Governors to extend to the female side the system of artificially heating the single rooms, which has proved so successful on the male side. The patients' clothing was sufficiently warm, while there certainly was less excitement amongst the patients than on the occasion of my last inspection.

Clothing. I think the Governors would find good Irish tweed a better material than frieze (which so quickly becomes soiled and greasy) for the men's clothing.

Employment. The following Table shows the number of patients employed:—

| | Male. | Female. |
|--|-------|---------|
| Assisting attendants in wards, | 48 | 24 |
| As garden or field labourers, | 44 | - |
| As tailors, | 2 | - |
| As shoemaker, | 1 | - |
| As joiner, | 1 | - |
| In the laundry, | - | 15 |
| At needlework, | - | 38 |
| At knitting, | - | 25 |
| Total, | 96 | 103 |

I hope when the new buildings have been completed it may be found possible to increase the number of the employed. The high state of cultivation of the farm reflects credit alike on the workers and on the land steward. What strikes me in the occupation is the practical absence of any employment for the men, except cleaning out the wards or working on the farm.

In many of our Asylums now-a-days, the men unsuitable for outdoor work are employed as tradesmen, and, in some cases even, they are taught a trade. The following return from one of our Asylums containing 391 men and 249 women, for the 1st December instant, will best illustrate what I mean :—

RETURN.

| | Male. | Female. |
|---|-------|---------|
| Assisting attendants in wards, | 69 | 43 |
| As garden or field labourers, | 51 | - |
| As farm servants, | 5 | 1 |
| Cleaning drains, | 10 | - |
| As storekeepers, | 4 | - |
| As messengers, | 3 | - |
| As slopers, | 4 | - |
| Making roads, &c., | 70 | - |
| As tailors, | 4 | - |
| As shoemakers, | 6 | - |
| As upholsterers and mat making, | 25 | 10 |
| As painters, | 9 | - |
| As joiners, | 5 | - |
| As plumbers and in lighting department, | 7 | - |
| As masons, | 3 | - |
| At building, &c., | 20 | - |
| In the kitchen, | 12 | 4 |
| In the laundry, | - | 46 |
| In officers' quarters, | 3 | 4 |
| At needlework, | - | 82 |
| At knitting, | - | 29 |
| Other employment, | 13 | - |
| Dining hall, | 16 | 3 |
| Repairing buildings, | 7 | - |
| Total employed, | 377 | 248 |

I find, from an examination of the Chaplains' books, that on the Sunday previous to my inspection 70 men and 57 women attended the Roman Catholic Divine service, while the number of Protestants, similarly attending, was 4 men and 4 women.

The patients' amusements receive due attention, and the resident Amusements Medical Superintendent gives weekly one of those fluent and instructive illustrated lectures for which his services are so frequently sought.

15th December, 1893.

ARMAGH
RETREAT.

ARMAGH RETREAT PRIVATE ASYLUM.

Inspected on
26th July,
1893.

Since the last inspection of this Institution on 10th December, 1892, 2 ladies and 3 gentlemen have been admitted, and 3 ladies have been discharged, leaving 21 gentlemen and 13 ladies resident on this date.

Out of the recently admitted ladies Mrs. M. is marked melancholic, and will require to be carefully and constantly watched.

No death has occurred since last inspection among the patients.

Interviews
with patients.

I went through all parts of the house, and saw all the patients, conversing with such as were willing to converse. I had a private interview with a gentleman who desired it. One old lady was confined to her bed by general debility.

Improvements.

The general condition of the fittings and furniture is more satisfactory than on the occasion of my last visit. The entire building has been heated by hot water pipes, while the rooms have been brightened and made more cheerful by simple decorations.

Baths.

Baths are given fortnightly only, it should be a fixed rule that every patient should have a warm bath at the least once a week. I would

Suggested
improvements.

suggest that linoleum should be substituted for carpets in rooms occupied by wet and dirty patients, and the offensive earth closets opening off the small yard should be got rid of. The remaining old wooden bedsteads should be gradually replaced.

Resident
Medical
Officer.

I am glad to learn that the Institution is likely to have the advantage of having a medical man resident in the house.

Restraint and
seclusion.

The statutory books are duly posted. The register of restraint and seclusion shows that only two patients have been restrained since last visit, Miss G. for surgical reasons, and the other, Miss T., as being dangerous to herself.

Outdoor
exercise.

The grounds are well kept, and the patients, it is stated, are constantly out of doors when weather permits.

Religious
Services.

The Presbyterian clergyman visits, and makes corresponding entries in the book kept for the purpose. It will be necessary for the proprietor to get the Protestant and Roman Catholic clergymen to similarly enter the dates of their respective visits, and the character of the religious aid which they minister to the patients.

COURSE
LODGE.

COURSE LODGE PRIVATE ASYLUM.

Inspected on
26th July,
1893.

Course Lodge was last visited on the 10th December, 1892, when there were 10 ladies resident. Since that date three patients have been admitted, one of whom has since been discharged, leaving 12 ladies on the register. Of the two admissions since last inspection one is an old lady subject to marked delusions, and stated to be diabetic, while the second is a young married lady suffering from her first attack of insanity. The Case-book is silent as to the cause of her illness, stating nothing more than that the date of her admission and the date on which the attack commenced. A history of such a case should be carefully recorded, and if necessary the patient should be seen by a medical man more frequently than once a fortnight.

Condition of
patients lately
admitted.

Restraint.

I found three patients confined to bed (1) Miss P., recovering from an attack of excitement; (2) Mrs. W., the diabetic patient already referred to, and (3) Miss J., the last at times very destructive, and she has been suffering from the beginning of July from acute excitement. At the commencement of the attack she smashed all the glass in the window of her room, cutting her wrists severely, and the proprietor then had the shutters nailed against the empty window frame. She has also since the commencement of her present attack been kept almost constantly

in mechanical restraint both by day and night ; at night, and frequently during the day, she is fastened down to her bed by a strong hempen rope. I found her in this pitiful condition in the darkened room, not alone restrained by a straight waistcoat, but tied down to the bed like an animal by a rope passing over her body.

COURSE
LODGE.

I ascertained that another patient (Miss P.) was in mechanical restraint the previous day, but no entry of its application was made in any of the books. Not alone are these entries of mechanical restraint statutory, but if they are omitted, asylum returns become a mockery and a snare, by giving a false impression of the treatment adopted. The medical officer had only just left the institution as I arrived, and had entered in his statement book the following :—

Duty of
Visiting
Medical
Officer.

Visited Course Lodge to-day ; everything satisfactory. Ladies in good health except Miss J., who is excited, and Miss P., with whom, however, the excitement is subsiding. Miss J. must be kept in restraint at intervals during day and night.

Every application of mechanical restraint should be certified as being necessary by the medical officer ; the reasons which render it necessary, its form, and its duration should be clearly stated. Such a report as that quoted would seem to me to indicate that the visiting medical man does not fully realise the serious responsibility devolving on him in the case of a licensed house not kept by a physician, or his statutory obligation for this fortnightly visit, " to make and sign a statement of the health of each and every patient in such licensed house, and the condition of the house." (5 and 6 Vic., cap 123, section 18).

I found the patients' room fairly clean, and am glad to be able to state that the system of heating by hot water pipes has been introduced throughout the building. The feather beds in use in all the bedrooms are, in our opinion, unsuited for the insane, so many of whom are dirty and degraded in their habits.

I found in the case of one lady recently admitted that her bed was wet and offensive, although supposed to be protected by a piece of mackintosh sheeting. Condition of patients.

We have no reason to suppose that patients in this institution are treated unkindly, or that many quiet and contented patients do not find in it a home which they consider fairly comfortable, but nevertheless my colleague and I have arrived at a very definite conclusion, viz.—that this asylum as at present constituted is suitable only for the reception of quiet and harmless cases of insanity, but that those patients who are excited or dangerous and destructive, should be rigorously excluded, and we trust that on the renewal of the license the magistrate may take our recommendation into consideration.

House suitable
only for quiet
and harmless
patients.

Dr. Courtenay drew attention to the neglect shown in writing up the different books, required to be kept by the Private Asylums Act and I have to repeat his complaint. If the statutory requirements in this regard be not fulfilled, or if we should again find any patient subject to what we may consider abuse of mechanical restraint, it will be our duty to act on the 13th section of the Act referred to, and report to the Lord Chancellor.

Neglect in
keeping
statutory
books.

28th July, 1893.

ELM LAWN.

ELM LAWN PRIVATE ASYLUM.

Inspected on
14th July,
1893.

This licensed house has at present six ladies resident in it, one lady having been admitted since the last visit. No other change has taken place. I examined into the mental condition of each patient, and entered notes thereon in the Case-book. All the ladies are quiet, and well-behaved; one or two are able to converse, and take an interest in the outside world; two go for walks in the country, three amuse themselves with the piano, playing games, or working. The clergyman visits once a week, morning prayers are read by Miss Bernard, and one of the ladies is at times able to attend the village church.

Staff. The staff consists of two nurses, who assist Miss Bernard in the care of the ladies.

Improvements. The house has been much improved since my last visit. All the rooms and corridors have been neatly papered and painted, the bedding is clean and plentiful, the rooms are neatly furnished, tidy, and properly ventilated.

The garden and grounds are certainly very limited in extent, and unfortunately surrounded by buildings; they are, however, constantly occupied by the patients, who seem to derive much enjoyment from walking about in the open air.

20th July, 1893.

ELM LAWN.

ELM LAWN PRIVATE ASYLUM.

Inspected on
28th Dec.,
1893.

I visited Elm Lawn to-day, and saw the six ladies who are resident. No change has taken place amongst them since my last visit. No fresh admissions, discharges or deaths, have occurred. One lady, a rather late admission, is somewhat improved, in another case the mental powers would appear to have deteriorated. I saw the ladies in their sitting-room. This is a large, well ventilated, and cheerful room, kept at a proper temperature. Here the patients sit during bad weather, and take their meals. I think it might be an improvement if a separate room were used at meal time, so as to give them all a change on wet days from one room to another. The bedrooms were found in proper order, clean, and well ventilated.

All the books and registers are kept by Miss Bernard. No change has taken place with regard to the ministration of religion.

5th January, 1894.

FARNHAM
HOUSE AND
MARYVILLE.

FARNHAM HOUSE AND MARYVILLE PRIVATE LUNATIC
ASYLUMS.

Inspected on
9th Oct., 1893.

We visited these houses to-day. A previous visit was made on the 24th June last, but no report was made at the time.

There are resident at the present date, seventeen gentlemen and twenty-six ladies. Since the last visit there are three new patients, viz:—one gentleman and two ladies, who in our opinion; have been properly placed under care and treatment. All the patients appeared in good health and seemed well looked after.

From the records of restraint, it would appear that one lady has been thus treated on two occasions, for short periods.

In the report of September 1892, a mistake was made in stating that no alterations and improvements had been carried out, whereas Dr. Patton has since pointed out, that at that time the bedrooms had been heated with hot water, an additional window put in in one of the houses, and wire bottoms substituted for palliasses in the beds. These improvements were not, unfortunately, pointed out at the time.

Both ladies and gentlemen drive out in the country, and a few of them are able to enjoy walking exercise on parole.

The books are carefully written up, and the Case-book, in which we entered notes of certain cases, is kept by Dr. Patton.

FARNHAM
HOUSE AND
MARYVILLE.

Restraint.

Improvements.

Outdoor
exercise.

Books.

9th October, 1893.

GLENSIDE HOUSE PRIVATE ASYLUM.

GLENSIDE
HOUSE.

Of the five patients resident on the date of my last visit to Glenside Asylum, 23rd March, 1893, one has been discharged "recovered," one has been transferred to the Belfast District Asylum, and one has been removed, in a much improved mental condition, with the view of his being placed in the Downpatrick District Asylum. There has been no admission since last visit, so that only two patients remain under treatment. One of these (Mr. R.) is a case of marked delusional insanity, while the second (Mr. J.) is a melancholic; his melancholia, however, occasionally alternating, as is not uncommon, with outbreaks of excitement. He shows no marked improvement since I last saw him, and the danger of his attempting to injure himself must be constantly borne in mind.

Inspected on
29th Nov.,
1893.

Condition of
patients.

The patients made no complaint to me, and the house, and the patients' surroundings are comfortable.

I am glad to be able to state that I found to-day all the books posted, and the requirements of the Lunacy Law in this respect duly complied with.

The register of restraint and seclusion shows that one patient was under restraint on two occasions for short periods ($2\frac{1}{2}$ and 3 hours) last April.

Restraint and
seclusion.

The Presbyterian and Episcopalian clergymen visit the patients occasionally.

Divine Service.

HAMPSTEAD HOUSE PRIVATE ASYLUM.

HAMPSTEAD
HOUSE.

This house at present contains 21 gentlemen. The last visit was paid on the 30th June, 1893, but no report has been written since the 5th September, 1892.

Inspected on
16th August
and 5th Sept.
1893.

Since then four gentlemen have been received, four have been discharged, and one has died. The death resulted from general paralysis of the insane.

In the case of one gentleman who was on constant parole, fresh certificates have been obtained as the patient's mental condition rendered it unwise to allow him beyond the grounds.

HAMPSTEAD
HOUSE.Interviews
with patients.
Dinner.

I saw all the gentlemen, who appear in good, bodily health, and had special interviews with some of the more recent cases; of the result of these interviews I entered notes in the "The Patient Book."

Dinner was going on during my visit, and I was much pleased to see that proper attention was paid to the manner in which the meal was served. The table was neatly laid, and furnished with all the appurtenances to which the patients would have been accustomed in their own homes. The result was that the patients behaved themselves with propriety.

New bed-
rooms.

Since my last visit, a new suite of bedrooms has been brought into occupation. These rooms appear most suitable for the use of the insane; they are neatly furnished, and properly ventilated. I would only suggest that, when fit for papering and painting, the floors should be varnished and bees-waxed, a most important matter in this damp climate, as it obviates constant wet from washing.

Books.

The books (with the exception of the Medical Journal) are carefully kept. Dr. Eustace objects to the keeping of the Medical Journal (Schedule c. 5 and 6 Vic. cap. 123), as he understands the act to direct this book to be kept only in such licensed houses as have not a resident medical officer. The Case-books always do credit to Dr. J. Eustace from the careful manner in which they are written up, showing the interest he takes in his patients.

Patients at
seaside.

Some of the gentlemen have been staying at the seaside during the early part of the season, from which they derived much benefit and pleasure.

Chaplain.

A paid chaplain now attends to the religious requirements of the patients.

Restraint.

Restraint has been used in one case on two occasions.

13th September, 1893.

HARTFIELD
HOUSE.Inspected on
4th Jan. 1898.

HARTFIELD HOUSE PRIVATE ASYLUM.

Visited this house to-day. I found that many of the recommendations made in my last report have been carried out. The bedrooms, and some of the sitting-rooms have been papered and painted. The heating of the rooms by hot water pipes has now been satisfactorily carried out. It is proposed to erect indoor hydrants, and ladders have been purchased for use in case of fire.

HARTFIELD
HOUSE.Inspected on
10th August,
1898.

HARTFIELD HOUSE PRIVATE ASYLUM.

This house, licensed to Dr. F. E. Lynch, and Dr. John J. McGrath, for the reception of 25 patients, at present contains 17 gentlemen. At last visit the number was 19. 2 have been admitted, 3 have been discharged, and 1 has died. The 1 death took place from pulmonary congestion. I saw and spoke to all the patients except 4, who were out driving, and whom I must take another opportunity of visiting. No complaints were made to me except of undue detention, and in these cases I was satisfied that the mental state of the patient rendered his detention justifiable.

Improvements.

I am very glad to be in a position to report that many improvements have been carried out since my last visit. The sitting-rooms have been

newly fitted up, some more furniture has been supplied, and the walls have been neatly papered and painted. These rooms, as a general rule, now look out on the front of the house, the back room to which objection was made in a previous report being otherwise utilized, and another converted into a billiard-room, for which a very useful billiard table has been obtained. All the corridors have been also papered and painted. The bedrooms have also been made more comfortable; some have been papered and painted. The linen on all the beds appeared to be clean.

All the gentlemen go for walks twice a week, and four are sent out for drives.

The amusements consist of billiard and bagatelle tables, music, and games. A second piano has been recently obtained.

One of the patients occupies himself at farm work.

Restraint has only been had recourse to on one occasion.

16th August, 1893.

HIGHFIELD
HOUSE.

Outdoor
exercise.
Amusements.

Employment.
Restraint.

HIGHFIELD PRIVATE ASYLUM.

This institution was last visited on the 6th September, 1892. Since that date two ladies have been admitted, and three have been discharged. No death has taken place. I saw and spoke to each patient, and satisfied myself that the ladies recently admitted required the care and treatment of an asylum.

With the exception of one lady constantly confined to bed from bodily weakness, all were in good bodily health, and appeared to be well and carefully attended to.

There is no record of restraint since last visit, but two ladies would appear to have been secluded for short periods—one on three occasions and the other twice.

The bedrooms, sitting-rooms, and corridors continue to be kept with due regard to neatness and comfort, and the arrangements are as far as possible those of a private house.

Additional hot water pipes have been erected in one of the passages. The temperature throughout the house was all that could be desired.

Associated entertainments are frequently held, and the patients appear to be afforded every liberty compatible with their safety.

Four Protestant ladies are able to attend divine service in the village church, and three Catholics are able to be present at mass.

As previously stated, the Case-book reflects the greatest credit on the medical officer. The books, with the exception of the medical journal, are carefully kept.

16th August, 1893.

HIGHFIELD
HOUSE.

Inspected on
9th March,
1893.

Health.
Restraint and
seclusion.

Accommoda-
tion.

Heating.
Amusements.

Divine Service.

Books.

HIGHFIELD PRIVATE ASYLUM.

Highfield House was last visited on the 3rd March, 1893. Since then the following changes have taken place amongst the patients—4 have been admitted, 4 discharged, and 1 has died, leaving 15 ladies now resident. All are at present in good health, and no one is confined to bed, with the exception of one old and feeble lady, who may be said to be permanently bed-ridden.

No one was at the time of my visit under any form of restraint, but since last visit it was found necessary to so treat a very restless and

HIGHFIELD
HOUSE.

Inspected on
31st August,
1893.

Present
condition of
patients.

Restraint.

- HIGHFIELD House.** very feeble lady who has since died. In this case it would appear that this was the only means of preventing injury to the patient on account of her restless habits and debilitated state.
- Mental condition of patients.** I spoke to every patient and entered notes concerning the mental condition of some of them in the Patients' Book. All the admissions appear to have been suitably placed under care.
- Accommodation and treatment.** The house was found in its usual excellent order. Everything seems to show that the treatment of the patients is kindly, judicious, and liberal. The bedrooms are well furnished, and the sitting-rooms have all the comforts of a modern house.
- Books.** The books, with the exception of the Medical Journal, continue to be carefully kept.

28th August, 1893.

LINDVILLE PRIVATE ASYLUM.

- LINDVILLE.**
- Inspected on 4th Aug., 1893.** This house, licensed to Dr. Osburne for eight gentlemen, and sixteen ladies, at present contains six gentlemen, and fourteen ladies. Since last visit two ladies have been admitted, and one has been discharged. I saw and spoke to all the inmates who were able or willing to speak to me, and entered in the Patients' book observations as regards the mental state in certain cases.
- General condition of patients.** So far as cleanliness is concerned, both as regards their persons and their clothing, the patients appear to be fairly well looked after, but greater attention should be paid to neatness and tidiness of dress. This is especially required on the male side.
- Dining-room required.** I saw some of the ladies eating their dinner, the food seemed good, but I think perhaps, if an associated dining-room was instituted, it would be an improvement, as nothing tends more to improve the habits of the insane, than order and decorum in serving and eating their meals. Where patients are able to have a separate sitting-room, it is quite right that they should dine in their own room, but it is not so suitable when they have to dine in their bedroom.
- Rates of payment.** The rates of payment at present range from about £60 to £150 per annum.
- Staff.** The Staff consists of three male and four female attendants.
- Employments. Amusements.** The gentlemen do not seem to employ themselves at any form of industry. Some of the ladies sew and knit. The amusements consist of cards, bagatelle, and the piano. Two gentlemen go for walks and drives outside the grounds, but none of the ladies go beyond the precincts of the grounds. The ladies utilise the field in front of the institution for exercise, while the gentlemen have another field for their use in the rear. I think, however, that greater efforts should be made to provide more extended exercise for both sexes.
- Outdoor exercise.**
- Divine Service.** Both Catholic and Protestant clergymen attend at least once a week, and the religious requirements of the patients appear to be carefully attended to.

11th August, 1893.

LINDVILLE PRIVATE LUNATIC ASYLUM.

LINDVILLE.

Inspected on
16th Nov.,
1893.

There are six gentlemen and fourteen ladies at present resident in this house. Since the last visit, one lady has been discharged recovered, there has been no admission, and no death has taken place. Both ladies and gentlemen (with the exception of two very old and feeble cases), enjoy good bodily health, but one lady is reported to have only lately recovered from an attack of facial erysipelas.

I am sorry to find that Miss M'Kenzie, the Matron, is laid up with an attack of influenza; she is, however, progressing towards recovery. She has shown such great interest and energy in the management of the establishment, that her enforced absence is much to be regretted. The want of her supervision may well explain that the beds and bedding are not in as nice order as they were found on former visits.

Illness of
Matron.Beds and
bedding.

As the day was very wet the ladies and gentlemen were all indoors in their sittingrooms and bedrooms, but all are said to have regular exercise in the open air, and a few go for drives in the surrounding country.

Out-door
exercise.

Some of the rooms and corridors would require some new furniture and carpeting. Dr. Osburne tells me that he proposes to improve the sanitary arrangements by the introduction of a more copious supply of water for flushing the closets. These, however, would require further alterations. The wooden fittings, and the floors connected with the closets, should be removed and replaced by tiles. When this is done, much greater attention should be paid by the attendants to the way in which these rooms are kept.

Improvements
suggested.

The books and registers were examined, and found written up to date. There is no entry of restraint or seclusion. Dr. Osburne tells me that he will not retain any patient of dangerous or suicidal habits.

Books.

The religious requirements of the insane inmates are carefully attended to by the clergymen of the different denominations.

Divine Service.

23rd November, 1893.

RATHGAR HOUSE PRIVATE ASYLUM.

RATHGAR
HOUSE.Inspected on
18th July,
1893.

Visited on the 18th July, 1893. Saw the two ladies resident. One lady has been discharged since last visit. Miss M. is suffering from an attack of bronchitis, and Miss H. has got a cold, so that neither are able to go out, but it is to be hoped that every opportunity will be taken of sending them out as the sittingroom is small. The clergyman has not visited since May, as he has been absent from ill-health.

18th July, 1893.

HOUSE OF ST. JOHN OF GOD.

ST. JOHN OF
GOD.Inspected on
20th Sept.,
1893.

This licensed house has been frequently visited during the year, but up to this no official report has been made. It is proposed to add very materially to the accommodation of the institution, and for this purpose a new block is being built which, when completed, will provide for

| | |
|--|---|
| St. JOHN OF GOD. | a large number of additional patients. I may here point out that the plans of these additions when completed must be furnished to the Clerk of the Peace in accordance with the provisions of 5 & 6 Vic., cap. 123, sec. 6. |
| Increased accommodation. | |
| Deaths. | The inmates now number 54, 21 having being admitted since the beginning of the year; 10 have been discharged, and 6 have died. The deaths resulted from natural causes, three from general paralysis of the insane, one from simple paralysis, one from old age, and one from cancer of the mouth. The patients would appear to be at present of a peculiarly helpless type; five are confined to bed, and a large number require special nursing and care. The Brothers of the Community are enabled to pay special attention to this class of patients; in fact all the work of the Institution may be said to be done by them. |
| General condition of patients. | |
| Restraint and seclusion. | During the present year restraint has been used in ten cases, and seclusion in nine. |
| Accident. | The only accident recorded is in the case of a patient who cut his hand by breaking glass. |
| Accommodation good. | The accommodation throughout the Institution is very good. The ventilation of the single rooms off the infirmary might be improved, but it is proposed, I believe, to provide a new infirmary in the new block, the existing one to be used for other purposes. |
| | A good deal of disturbance is, of course, caused by the presence of such a large number of workmen, and by the dirt and confusion caused by the building operations. |
| Sitting-rooms. | The sittingrooms for the better class of patients are furnished with due regard to comfort. These rooms are divided into three, viz.—a large general sittingroom, a smokingroom, and a diningroom opening on to a garden, in which are water closets and lavatories. |
| Day-rooms. | Another dayroom is provided for the more excited and troublesome patients, but is only a temporary arrangement, and more suitable accommodation for this class will be provided in the new wing. |
| Amusements. | A plentiful supply of newspapers are scattered about the sittingrooms, and in the smokingroom is a billiard table for the use of the patients. Concerts, theatrical and magic lantern performances are given at intervals, and a number of the patients walk in the country on Sundays. |
| Staff. | Eighteen Brothers belonging to the community act as attendants. Two do duty at night, and but one paid attendant is employed. |
| Employment. | Eight patients employ themselves at some light work. Few of them have been accustomed to any form of manual labour, so that it is difficult to get them to fix their attention on any occupation. This is unfortunate, as the farm attached to the Institution ought to provide plenty of exercise. |
| Divine Service. | On Sundays 45 patients on an average attend Mass, and on weekdays many regularly attend. |
| Books. | The books are carefully kept up, and the Case-book is posted up by the visiting doctor. I entered notes in it concerning the mental condition of one or two patients. |
| Hope the Brothers will extend their good work and provide accommodation for imbeciles. | The accommodation provided here, at very low annual payments, for the middle class who are able to pay only moderate rates of board, is much required in Ireland, and its extension would appear to me to be a distinct boon, as in this country the claims of this class of insane persons have never been sufficiently recognized. The charity which has been so magnificently displayed in England in the provision of the |

various lunatic hospitals, and in Scotland by the Royal Asylums, has, with the exception of Swift's Hospital, no corresponding monuments in Ireland, nor in so poor a country could it be hoped for. The work of this community, therefore, so far as it provides useful accommodation for this class of the insane, is a certain boon to society; and if the Brothers at some future time are able to provide accommodation for the imbecile class, who are now so much neglected, I believe that their helpless condition will be much improved.

ST. JOHN OF
GOD.

29th September, 1893.

ST. PATRICK'S (BELMONT PARK) PRIVATE ASYLUM.

ST. PATRICK'S
(BELMONT).

The last visit paid was on the 13th December, 1892. Since then two patients have been admitted and one has been discharged.

Inspected on
28th Feb.,
1893.

Both the gentlemen admitted would appear to me to be suitable subjects for asylum treatment. One of the old patients remains in his room of his own accord, suffering from hypochondriacal delusions, otherwise no one is confined to bed from bodily disease, and since the last visit neither restraint nor seclusion has been made use of.

The greater number of the gentlemen wander about the garden at the rear of the Institution, I think, however, every effort should be made to induce those who can be trusted to take extended exercise in the open country.

Out-door
exercise.

Six of the patients are reported to employ themselves at some light work. It is a matter for congratulation that the number so employed is by degrees increasing, as the difficulties of inducing the insane in private asylums to take any interest in any form of industry is very great indeed, and nothing tends more to their happiness and peace of mind.

Employment.

Owing to its situation and surroundings this Institution affords special facilities for exercise and amusement in the open air, which ought to be taken advantage of.

I saw, and spoke to each of the patients. All appear to be well treated, and carefully looked after; but I think that a more liberal supply of clothing should be insisted on, as some of the gentlemen were shabbily dressed, their clothes worn and stained.

Condition of
patients.

The various corridors, day-rooms, and bedrooms were, as usual, in very nice order; well kept, well furnished, warm, and comfortable.

Painting and papering is constantly being carried on.

Since my last visit great advances have been made in laying out and planting the grounds in the front of the house. This work will, however, still give much employment and occupy a considerable time before completion.

Grounds
improved.

All the patients, with the exception of four, are able to attend Mass in the private chapel of the Institution.

Amusements for the inmates (music, games, and books) are liberally provided.

Amusements.
Books.

All the registers and books are carefully kept.

7th March, 1893.

ST. PATRICK'S
HOSPITAL.
(SWIFT'S).

Inspected on
6th and 7th
Dec., 1893.

ST. PATRICK'S HOSPITAL.

I spent part of yesterday and to-day in inspecting the Hospital, and saw all the patients resident.

Since the 1st January last the following changes have taken place:—

| | Male. | Female. | Total. |
|-------------------------------------|-------|---------|--------|
| On register at that date, | 37 | 55 | 92 |
| Admitted since, | 9 | 13 | 22 |
| Discharged, | 4 | 6 | 10 |
| Died | 5 | 2 | 7 |
| On register at this date, | 37 | 60 | 97 |

One lady is at present absent on probation, and it is hoped that her return for further treatment will not be found necessary.

The patients recently admitted (of whom two—one lady and one gentleman—arrived during my visit) appear to be proper subjects for care and treatment.

The deaths call for no special reference, all were from natural causes. There has been no suicide or accidental death.

Accident.

Only one accident is recorded; the fracture of a collar bone from a fall.

Restraint or
seclusion.

No entry is to be found of restraint or seclusion. I found, however, one lady locked in her room while eating her dinner. The use of restraint and seclusion is entirely a matter for the discretion of the medical officers, but a careful record of every occasion on which such means of treatment are utilised is required by the Act of Parliament, and a separate book should be kept for such records.

Rates of
payment.

As regards the rates of payment charged for the maintenance of the patients, I find that eleven males and eleven females pay nothing; one female pays £9 per annum; fifteen males and thirty females pay from £10 to £60; four males and five females pay £60; six males and eleven females pay from £60 to £100; and one male and two females pay from £100 to £109 per annum.

The average cost of each patient is stated to be about £68 per annum.

Health.

The general health of the inmates is very good, only one lady being confined to bed from incurable disease.

General
condition of
patients.

As a general rule both ladies and gentlemen were tidy and neat in their appearance, but a number of the old patients are of very degraded habits, and are kept tidy with great difficulty. One or two of the gentlemen of slovenly habits would require more frequent changes of clothing.

Dinner.

I saw the ladies at dinner. The meal appeared to be served with due regard to propriety, but, in my opinion, the comfort of the patients would be increased, their habits improved, and the labour of the staff lessened, if a general dining-room could be set apart for their use, where the greater number could dine together.

General
dining-room
suggested.

Bedding.

As regards the bedding, the sheets are very clean and white, and the bed clothes sufficient. In some few cases, owing to the filthy and

destructive habits of the patient, strong ticken coverlets have to be used. I think, however, these ought to be covered, at least on one side, with rugging.

ST. PATRICK'S
HOSPITAL.
(SWIFT'S).

During the past year the following alterations and improvements have been carried out:—Two dormitories on each side have been formed by removing the partition walls and throwing three single rooms into one; these new rooms have been floored with pitch-pine, the walls neatly painted, grates and chimneys erected, new bedsteads and other furniture provided. These rooms are certainly a great improvement, but, having regard to the amount of work done, I understand the cost has been high.

Alterations and
improvements.

It is proposed to stain and bees-wax the floor of the lower corridor on the female side; a few single rooms have been painted and papered, and a number of new bedsteads, with wire woven mattresses, have been provided. I must, however repeat the observations made in previous reports, that the Board of Governors of St. Patrick's Hospital should earnestly consider how they can render the accommodation in the Hospital more in accordance with the requirements of the modern treatment of insanity, as unless very substantial alterations are carried out to change the prison-like aspect of the building, it will be found that, having regard to the great advances now being made in similar institutions in other countries, this building will be no longer considered suitable as a residence for the insane, and that the trust committed to the Governors' keeping will be rendered valueless.

Building
unsuitable.

Many of the improvements suggested in former reports still remain to be carried out; the sitting-rooms, bed-rooms and corridors require painting and papering, and additional furniture, strips of carpet or linoleum are required in the corridors. The floors of single rooms for the more troublesome patients would require to be painted, bees-waxed, and polished, or, where the occupants are old and feeble, covered with felt carpeting. The walls in many of these rooms ought to be done in cement for a few feet, so as to render the surface smooth. In all these single rooms the ventilation is most defective, and fresh air can only be obtained by leaving the doors open, so that the patients have free access to them at all times, rendering it impossible to keep the building in proper order.

Improvements
still necessary.

The bedding has been in some cases improved by the introduction of iron bedsteads with wire-woven bottoms; many old bedsteads and straw ticks are, however, still to be found. The use of straw for the insane is now happily becoming a thing of the past, as it is untidy and dirty, troublesome to the staff, expensive, and a constant source of danger from fire. The buildings are surrounded with low walls, and sheds, which are now to a great degree useless, and only serve to darken the wards and render the institution more prison-like. These might with great advantage be removed.

I must also again refer to the observations made in a former report with reference to the staff and their emoluments. The appointment of a trained hospital nurse to have charge of the sick and infirm would add much to the comfort of the patients. I would, however, especially ask the Governors to take into consideration the existing staff, their duties, and rate of wages. At present seven attendants (one, I believe, only temporarily employed to take charge of a dangerous patient) constitute the male staff, giving a ratio of one attendant to five patients. The female staff consists of twenty-one nurses (three charge and eighteen assistants), but of these a number are employed on the male side in cleaning the wards. The permanent residence, and employment of

Staff.

St. PATRICK'S HOSPITAL.
(SWIFT'S).
—
females in the male wards (except to nurse the sick) is now entirely done away with in modern asylums, as such employment in no way tends to the comfort of the insane, but rather relieves the male attendants of the responsibility (which ought to rest on them) for the cleanliness of their wards, lessens the opportunities for the employment of the patients, is subversive of discipline, morality, and order. The salary offered to the candidates for these posts is £6 per annum. How can it be expected that persons suitable to have charge of the insane can be obtained for such a sum?

I should advise the Board to abolish such an office of wardmaid on the male side in toto, and by this means reduce the female staff. The rate of wages for both male and female attendants might then be carefully considered, so as to make the scale offered in this hospital equal to that of other institutions. By this means only can the Governors expect to obtain suitable officials.

Amusements. The means of indoor amusement are not overlooked; magic lanterns and other associated entertainments are frequently given. Some of the patients go for drives in the country twice a week, and I saw a very fair supply of books and papers in the wards.

Employment. On an average five of the gentlemen are induced to employ themselves; two assist in the wards, and three do a little work in the garden. A number of the ladies are engaged at different sorts of needlework.

Divine Service. No change has taken place in the ministrations of religion. The Secretary still reads prayers for the Protestant patients, but the Catholic clergyman has still to attend the patients of his flock (of whom there are six) without fee or reward. Six of the Protestant patients are able to attend the neighbouring church.

Statutory books not kept. Some of the books prescribed by Law do not appear to be kept. There is no Medical Journal, no Patients' or Inspection Book, nor is any Case-book kept.

7th December, 1893.

St. VINCENT'S

ST. VINCENT'S PRIVATE ASYLUM.

Inspected on
26th Sept.,
1893.
—
The changes which have taken place since the last visit in August, 1892, have been numerous. The admissions have been 22, the discharges, including 12 recovered, 17, and the deaths 1, leaving in the establishment to-day 110 ladies. Some of these have been lately admitted; one lady, a nun, had arrived whilst I was in the house. Of the late admissions, all appeared to me suitable cases for treatment. Of the other patients, one or two appeared somewhat improved.

Condition of Patients. Into the mental health of one lady, I hope to make further inquiries. The only death which has taken place was due to consumption. At present the bodily health of all appeared to be remarkably good.

Although of course there are many old and feeble patients, I saw none in bed, and no epidemic disease has appeared. During the time of my visit, the patients were quiet and well behaved. Seven ladies have been restrained on 22 occasions. One lady was in her room partly on account of ill health, and partly on account of excitement.

Improvements. The house was in very good order and various improvements are being carried out. The old walls of the refractory yard are being removed, and railings substituted in their place. I would have wished that the yard had been thrown into the general pleasure grounds; how-

over, the managing committee appear to think that a separate airing St. Vincent's court is necessary for this class. A covered verandah is also being erected for these patients, so that they may take exercise on wet days.

Some of the accommodation provided in the new building is remarkably good, but I would strongly urge on the committee the want of a better day-room for the more troublesome patients. These at present occupy the corridors at the back of the building; places quite unsuitable as day-rooms—too small, dark, and gloomy, whereas most excellent rooms for this purpose might be obtained by utilizing some of the dormitories with pleasant look-outs. Day-rooms for troublesome patients should be as far as possible on the ground floor.

I would further suggest, for the consideration of the committee, the great advantage which would accrue to the patients by the purchase of a house near the sea for their use. Houses thus situated, attached to similar institutions in England and Scotland, have proved of such undoubted advantage, that I have no hesitation in asking that the matter should receive the earnest consideration of the committee. A house such as I suggest attached to the Institution would not only provide sea air for the convalescent, but would afford the means of constant change for the better class of patients.

During my visit I had the pleasure of seeing the patients at dinner in their dining-rooms, and was much pleased to find that every attention was given to the manner in which the meal was served. I may say that the food appeared of excellent quality, and well cooked.

Every attention appears to be given to the amusement of the patients. A library is provided from which they can obtain books, and a fair amount of light literature appeared scattered about the wards. A picnic to the seaside was given in the early summer. Comparatively few of the patients can be got to interest themselves in any occupation; very few of them have been accustomed to do anything all their lives, and it is a most difficult thing to induce them to learn how to work now. Nothing, however, has been found to benefit even private insane patients more than some form of light employment.

The staff in charge of the Institution consists of 18 Sisters of the Community, and 27 paid attendants; of these latter two do duty at night.

All the books and registers appear to be carefully kept. The Case Book, and Register of Restraint is kept by the medical officer.

Seventy-six patients assist at Mass on Sundays.

Divine Service.

26th September, 1893.

VERVILLE PRIVATE ASYLUM.

VERVILLE.

Since the last visit on the 4th January, 1893, four patients have been admitted, one of whom was a relapsed case; three have been discharged—two as recovered, and one as improved—leaving at present twenty-two ladies resident. I saw and spoke to all who were willing or able to speak to me, and in many cases entered notes of their mental condition. All appeared cases suitable for care in such an establishment. From the records I find that three patients were restrained on various occasions during the months of February and April last, but at the time of my visit no one was so treated. All appeared in good health, and were fairly clean and neat in their persons. Some few were excited

Inspected on
19th August,
1893.

Restraint.

General
condition.

| | |
|-----------------|--|
| VERVILLE. | and troublesome, but the greater number were quiet and well-behaved during my visit. With the exception of a few who are too infirm or too excited, all go for walks round the grounds, and some go daily for drives in the country. A picnic was given for them during the early summer. Fourteen of the patients are said to employ themselves at needlework, &c. About fifteen attend Mass on Sundays and holidays. |
| Exercise. | |
| Employment. | |
| Divine Service. | There is only one Protestant patient at present in the house, and she will not listen to the ministrations of religion. |
| Improvements. | Various improvements have been carried out since the last visit. The heating of the rooms is now completed; painting and papering is going on by degrees; the corridors to which objection was taken in previous reports are no longer used as sleeping-rooms for the patients; new drainage has been carried out and new pipes laid from the water-closets and baths. A new water-closet has been fitted up. |
| | Although the construction of this house renders the conversion into a modern asylum a difficult matter, still it is satisfactory to see improvements being carried out. |
| Books. | The Case-book is now fairly kept by Dr. Lynch, who looks after the health of the patients, and the other books and registers required by law are written up. |

24th August, 1893.

| | |
|---------------------------------|---|
| WOODBINE LODGE PRIVATE ASYLUM. | |
| WOODBINE LODGE. | |
| Inspected on 9th Dec., 1893. | Since the last visit to this house no new patient has been received nor has there been a death. The only change which has taken place is the discharge of a lady recovered, leaving seven patients resident at present. All appear to be in good health, but I cannot say that any of the ones present much hope of ultimate recovery. One old lady would appear to me not to require the restraint of an asylum. She informs me, however, that she remains of her own free will and has no other home to go to. All the others are properly detained under certificates. |
| Dining-room necessary. | I found the patients in their sitting-room. Here they take their meals and spend the day, except when out of doors for exercise. If it were possible, the service of the meals in a separate room would add much to the comfort and improvement of the patients. |
| Condition and care of patients. | All the ladies were neat in their appearance and in their persons, and appear to be well looked after. The suggestion made at last visit that a second nurse should be appointed to assist in the care of the patients and to accompany them when out for exercise has been carried out. |
| Restraint or seclusion. | No record appears of the use of either restraint or seclusion. |
| Amusements. | As regards amusement, the supply of books and papers is stated to be sufficient, and I saw a number scattered about the room where the patients were sitting. All the patients go out for exercise at least once a day, and when indoors they have a piano, on which they constantly play. |
| Exercise. | |
| Divine Service. | The clergyman visits once a month, and enters his attendance in a book kept for the purpose. I am sorry, however, to say that as yet none of the ladies have attended Divine service in the neighbouring church. I trust that Mrs. Bishop will in time be able to induce one or two of the ladies to accompany her on a Sunday. |

16th December, 1893.

BALLYMENA WORKHOUSE.

We visited the Ballymena Workhouse on the 30th January, and again on the 22nd March, 1893.

The number of insane inmates resident for whose maintenance payment is made by the Board of Governors of the Belfast District Asylum, under the provisions of Section 9 of 38 & 39 Vic., c.p. 67, now number 56 men and 53 women, an increase of 9 in the number for whose maintenance the contract between the Guardians and the Governors was made. It does not appear that the sanction of either the Local Government Board or of the Inspectors of Lunatics was obtained for these additional numbers. No additional accommodation has been provided, so that the space originally set apart is now overcrowded.

On the 30th January two of the patients were in bed, one of whom (Breen) appeared extremely weak and ill and had a black eye, which it was stated he had received in a struggle with another patient. We communicated with the Local Government Board with reference to this case, and received from them on the 16th ultimo a report from the workhouse medical officer, dated the 15th February, 1893, and letters on the same subject from the head attendant (John Blair) and third attendant (Henry Adger) dated respectively the 2nd and 4th March.

As the medical officer's report showed that Breen's injuries had been of a very serious character, while their origin was far from clear, we held an inquiry at the workhouse on the 22nd ultimo.

At the inquiry a patient named Ross M'Guinness gave a perfectly rational account of how the assault on Breen was committed. From M'Guinness's statement it would appear that Breen was frequently noisy at night, talking loudly to himself. A patient (Wilson) occupying the next bed, objected very strongly to this disturbance at night, and he had occasionally, since his admission last October, to get up and "punch" Breen as a means of making him keep quiet.

On the night of the 25th January, the night being clear, M'Guinness saw Wilson get out of bed and go for Breen. Breen also got up, and Wilson, having turned Breen's shirt over his head, struck him violently four or five times with his clenched fist on the front of the chest. M'Guinness further states that attendant Adger (whose cubicle adjoins the portion of the dormitory occupied by these patients) got up, and while he was unlocking his door Wilson darted back to bed; Breen also lay down, and Adger after speaking to him for a moment went back to his room.

Next morning M'Guinness noticed that Breen was exceptionally weak, staggering in his gait, and that he had a black eye. He told the head attendant of the occurrence later in the day, and Breen was moved down to the lower dormitory, and the medical officer was summoned. M'Guinness's statement regarding Adger is confirmed by second attendant Cook, whose room is immediately under Adger's. Cook states on the night in question he heard a scuffle overhead, and immediately after he heard attendant Adger get up and unlock his door. Adger, however, denies all knowledge of the assault on Breen—that he heard any scuffle, or that he got out of bed on the night in question and spoke to Breen. He admits, however, that Breen and Wilson used to quarrel, and that he had seen Wilson strike Breen during the daytime, though never at night.

From the facts now elicited, and from the reports furnished to us by the Local Government Board, there can be no doubt, in our opinion

BALLYMENA WORKHOUSE.

Inspected on 30th Jan. and 22nd March, 1893.

Increase in the number under provisions of Sect. 9, of 38 & 39 Vic., cap. 67.

Sanction for increase not obtained. Overcrowding.

Patient in bed from effects of an assault.

Inquiry into the circumstances of the assault.

**BALLYMENA
WORKHOUSE**Nature of
injuries
received.

Recommendations.

General
condition of
patients.

that on the night of the 25th January a very serious assault was committed by Wilson on Breen, placing his life in great jeopardy for a considerable time. The medical officer of the workhouse, a gentleman highly qualified and of very great intelligence, considered that Breen's injuries might have been the result of his struggling to breathe while being held down; but Mr. Davidson, when expressing this opinion, had not M'Guinness's evidence of the direct violence inflicted. Coupling this information with the physical signs detailed in the medical officer's report, we have no hesitation in stating that Breen must have sustained a fracture of one or more ribs, causing a wound of the lung.

In our opinion no reliance can be placed on attendant Adger's statements in this case, and as the head attendant considers Adger lacks intelligence and is untruthful, we think that his services as an attendant on the insane should be dispensed with.

Wilson is, in our opinion, an unsuitable patient for detention in a workhouse, and he should be sent back to the Belfast Asylum.

As regards the accommodation and general treatment of the insane in this workhouse we cannot report any material change since our last visit.

The closets immediately adjoining the dayrooms, to which we have before called attention, are offensive and the seats are broken.

We regret also to report that we found some of the patients infested with vermin.

**CORK
WORKHOUSE.**Inspected on
16th Nov.,
1893.Care and
attention to
patients.
General
condition of
patients.

Employment.

Accommodation
for female
patients.Accommodation
for male
patients.**CORK WORKHOUSE.**

There are at present 66 men and 164 women in the lunatic wards of the Cork Workhouse. This would show that an increase rather than a diminution of the numbers of the insane inmates had taken place since our last visit. This is to be regretted, as the indoor accommodation is admittedly insufficient for such a number, and the outdoor yards set apart for their use afford scant provision for exercise or employment. Although the overcrowded state of these wards, and the want of proper appliances for the treatment of the insane impose many difficulties in the way, I must bear testimony to the care and attention paid to these afflicted human beings by the officials in charge. Both males and females were clean in their persons and neatly dressed; their beds and bedding were clean, and every effort appeared to be made to encourage those who were in any way able to engage in some industrial occupation. About 100 women and 24 men are said to be employed. Of the former 30 wash in the laundry, and of the latter a small number work on the farm. Having regard to the mental condition of these lunatics, these returns are most creditable to those responsible for their care.

The women's wards consist of two dayrooms and several dormitories. One of the former is used as a workroom, but is too small and ill-suited for the purpose. The principal dayroom is a lean-to shed, in which the greater number of the insane women are located. It is fairly lighted and heated, but is, I think, too small for the number it has to contain. The dormitories are clean and well ventilated. Stoves are provided to heat them, but these were not lit at the time of my visit. The beds are provided with straw ticks, and the bedding appeared sufficient.

The accommodation provided for the men is more limited and inferior in every way to that on the female side. The rooms are dark, dreary, ill-ventilated, and much overcrowded. They consist of one dayroom

and two dormitories. One of these dormitories is so small and so ill-ventilated that a number of beds are removed from it by day, and these beds, filled with loose straw, are placed under a shed where the patients sit.

I understand that the blind have been removed from the building occupied by the insane, and the yards, both in front and rear, have been given up for the use of the latter.

Both male and female wards are in charge of paid attendants. On the female side a charge nurse and an assistant have charge of the attendants, insane inmates, and during the night an official visits the wards.

The male lunatics are cared for by one male attendant.

I think the guardians, considering the limited accommodation at their disposal, have done as much as could be expected for the inmates of these wards.

Having regard to the fact that the Poor Law is not legally responsible for the care of the insane poor, and that the Guardians have so many other objects of public charity to look after, I do not think that they should be asked to do more than to make every effort to have all cases suitable for treatment in the asylum removed to that institution. Although the insane persons in this workhouse are harmless and incurable, I cannot see that they are less worthy of proper treatment than the more troublesome insane, who are located in the asylum of the district.

CONK
WORKHOUSE.

Suggestion to
have suitable
cases trans-
ferred to
District
Asylum.

23rd November, 1893.

DROGHEDA WORKHOUSE.

I visited the Drogheda Workhouse yesterday, and saw the patients classified as lunatics or imbeciles, 54 in all, viz.:—34 males and 20 females. Neither their condition nor treatment call for any detailed remarks. I am glad to be able to state that I found the dormitories and day-rooms clean, the beds and coverings free from vermin, other than fleas, and the patients' clothing fairly good.

There are no less than ten epileptics among the patients, and, having regard to the habits of this class when suffering from fits, and to the fact that some of the other patients are also wet and dirty, the constant re-filling of the straw palliasses which is necessary must entail a large expenditure on the ratepayers. I believe the Guardians would find it much better, and in the long run cheaper, to provide strong iron bedsteads with wire-woven frames, and covered with a thin flock mattress. In the case of epileptics the bed frames are only just raised above the floor, while for degraded patients the mattress can be protected and the galvanized wire prevented from becoming rust-eaten by placing a square of mackintosh beneath the under-blanket.

The water-closets, opening off the dormitories, are offensive and of antiquated design. Providing the closets with modern wash-out pans, with automatic flushing, would not cost any very large sum, and I hope the Guardians will see how necessary it is to have closets opening directly off sleeping-rooms properly ventilated and trapped.

I trust, too, that further means of employment may be found for this most afflicted class of lunatics and imbeciles. There are no better workers than the insane when suitable employment is provided for them, and the modern treatment of insanity recognizes that in healthy employment the energy and excitement of the insane find their fullest satisfac-

DROGHEDA
WORKHOUSE.

Inspected on
19th April,
1893.

General
condition.

Epileptics.

Bedding.

Water-closets
defective.

Employment
recommended

**DROGHEDA
WORKHOUSE.**

tion. The thoughts and efforts of work impress the mind and withdraw it from empty longings and vain delusions. In a well-regulated Workhouse like Drogheda there is no reason why arrangements could not be made, as is done in all the Scotch Workhouses, for employing the men capable of outdoor work in agricultural labour, and in finding some light kind of mechanical employment for others of the remainder. The women could be taught or encouraged to sew, knit, and do laundry work.

20th April, 1893.

RATHDOWN UNION.**RATHDOWN
WORKHOUSE.
(LOUGHLINSTOWN).**

Inspected on
4th Nov.,
1893.

General
condition.

On the 4th November, 1893, I visited the inmates of the lunatic wards of the Loughlinstown Workhouse.

These wards contain at present 34 men and 45 women. I can report favourably of their condition, and of the care and attention paid to the inmates.

Both men and women were comfortably dressed, clean, and tidy in their appearance. The beds and bedding are of excellent quality; the bedsteads are of iron, with wire-woven bottoms, covered with hair mattresses. The sheets are clean, and the blankets sufficient. On the male side a small dayroom is provided, but it is not sufficiently large for the number of men. On the female side no such accommodation is provided, and the women have to pass their days and sleep in the same room. I am bound to state, however, that the room in which they are located affords a large amount of floor space for each patient, and appears to be well ventilated. I think, however, the Guardians ought to consider the advisability of providing rooms for the accommodation of the male and female insane during the day. Very few of these inmates are confined to bed, and their condition is greatly benefited by a change to a room different from that in which they sleep.

Day-rooms
necessary.

On the male side the sleeping accommodation is not sufficient for the number of inmates, and ten have to sleep in other parts of the establishment.

"Idiot cells"
not used now.

I found good fires burning in both the male and female wards, and was pleased to learn that the rooms known as "Idiot Cells," of which there are two on each side, are now no longer used, as they are unsuitable for human habitation.

Bathing.

A moveable bath is provided for the use of the women, who are bathed once a week. I trust the Guardians will in time see their way to erect a fixed bath, with hot and cold water, for the use of both males and females.

Paid
attendants.

The wards are in charge of paid attendants, one for each sex.

Employment.

Two or three of the male lunatics are engaged on the farm, and about twenty women are employed at some form of light work. I would suggest that an effort should be made to employ a larger number of the men; nothing tends so much to their happiness as occupation.

Dietary

The dietary appears to be ample, and is regulated by the medical officer in accordance with the requirements of each case. The provisions which I saw seemed of excellent quality.

11th November, 1893.

WATERFORD UNION WORKHOUSE.

I visited to-day the lunacy departments of the Waterford Union Workhouse, and saw all those inmates classified as lunatics or idiots—40 women and 26 men.

The women are located in sheds run up in a small yard within the curtilage of the fever hospital. I need not dwell on the unsuitability of structure and position of these sheds as accommodation for the insane, inasmuch as the Guardians are fully sensible of their defects, and are about taking contracts for the erection of a new female lunacy department. I have had an opportunity of inspecting the plans; and having regard to the great improvement which the accommodation afforded will be on the present buildings, I am unwilling to offer any detailed criticism, especially as the plan has been adopted by a body of gentlemen so intelligent as the Waterford Guardians, and has been formally sanctioned by the Local Government Board. The accommodation provided will consist of three dormitories, 40 by 18 feet; one day-room, 33 by 16 feet; a nurses' room, 12½ by 17 feet; and a water-closet and bathroom on each floor. The rooms will have the advantage of cross light and ventilation, and the sanitary annexe will be cut off by a neck properly ventilated.

The day-room space, equal to 414 superficial feet, is, however, I think, insufficient for 40 or 45 patients. In Scotch workhouses the standard is 30 superficial feet for each person classified as insane; and without going so far as to say that this standard should be adopted in Ireland, I regret that the Guardians have not arranged to devote the whole of the ground floor as day-room and refectory accommodation, providing sleeping accommodation overhead.

Until the new building has been completed, and the patients removed to it, it would, I feel, be useless to offer any detailed criticism on the condition and treatment of these poor people. I certainly found no evidence that they were treated unkindly; and in the absence of baths and any proper lavatory arrangements, it is almost unreasonable to expect that they could be kept absolutely clean.

Their dietary is good and liberal. I think that the substitution of a dinner of potatoes and milk on one or two days in the week—at least during certain months of the year—for the present soup and meat dinner given every day, would be useful, and relished by a majority of the patients.

The male patients, 26 in number (and of these no less than 11 are confined to bed), are accommodated in the recently-erected male lunacy department. Here again, in my opinion, the day-room accommodation and the absence of any system of any artificial heating is to be regretted; but taken as a whole the building is a marked proof of the Guardians' intelligence and humanity. It is, however, much to be regretted that a trained nurse is not appointed to supervise the comfort and cleanliness of a most afflicted class of human beings. Doubtless, the Guardians are aware of the vast good which the introduction of religious sisterhoods has effected in our workhouse hospitals; but what hospital class needs more skilled and kindly nursing than the insane? Who are the usual occupants of a workhouse lunacy department? They are our brethren, degraded from congenital defect, from disease, or from senile decay; or they are epileptics, whose convulsive seizures need special watching and nursing. What is the use of placing such people in charge of a man who has other important duties to discharge, and who

WATERFORD
WORKHOUSE.Inspected on
28th Feb.,
1893.Bad accom-
modation for
female
patients.New buildings
contemplated.Day-room
space
insufficient.General
condition.

Dietary.

Male accom-
modation.Want of
trained
attendants.

**WATERFORD
WORKHOUSE.**

Patients very
unclean and
untidy.

has not been trained in the art of nursing, and placing under him as attendants ignorant and careless paupers? What is the use of providing a bathroom if it is not systematically used? It is quite painful in this new building to find the patients so untidy and uncleanly. In many cases their night-shirts and the blankets and sheets were unclean, while the straw underneath was in many cases soiled. In one instance (J. G.) the urine was running through the straw, and had stained and made offensive the boards underneath the bed, while the patient himself was threatened with bed-sores.

Suggestions.

What I would urge the Guardians to do, is to appoint a skilled and trained nurse to take charge of this division; that the patients should be regularly bathed; and that the medical officer should, at least once a week, make a minute inspection of the department, with the view to its being maintained in a good sanitary condition, and with the view to the patients' clothing being kept perfectly clean and tidy.

7th March, 1893.

APPENDIX G.

REPORTS ON ALLEGED INCREASE OF INSANITY
IN IRELAND.

CIRCULAR.

Lunacy Office, Dublin Castle,

December, 1893.

SIR,—We have been called upon by the Executive for a special report upon the alleged increasing prevalence of insanity in Ireland, and to enable us to comply with this request, we will feel much obliged by your being good enough to furnish us with the fullest information in your power, on this important subject, so far as it relates to your District.

We are aware that the materials do not, perhaps, at present everywhere exist for supplying, in connection with the question, a thoroughly satisfactory statement of the extent, the distribution, and the increase or decrease of prevailing insanity; but we hope that, with your local knowledge, and the facilities you possess for collecting the material facts bearing on the subject, you may be in a position to submit such a report with respect to it as will meet, in a large measure at least, the object contemplated by the Government in asking for this information.

While desiring that you should exercise in this matter a perfectly unfettered discretion in affording any information you considered calculated to aid in the solution of the question at issue which your experience may suggest, we are anxious that special attention should be given in your report to the following points, viz. :—

I.—INCREASE of the rate of insanity in your district, as indicated by the Asylum records, during the ten years ending 31st December, 1892, shown by the admissions, discharges, and deaths for each year, the number resident on the 31st of December, for each year, and the average number resident.

II.—We need hardly point out that the only proper test of the increase of insanity is the proportion of first attacks to the population during the period under review.

It will therefore be most necessary to give :—

- (a.) An accurate return of FIRST ADMISSIONS, and the duration of mental disease on admission of such cases.
- (b.) A return of transfers, re-admissions, and congenital idiots.
- (c.) A return of workhouse cases, distinguishing first admissions, and giving where possible the duration of mental disease on admission.

III. PROPORTIONAL AGE distribution of the inmates of the District Asylum under your charge on the 31st December, 1887, and the 31st December, 1892, respectively.

Proportion per 1,000 at all ages, viz. :—

| AGE. | 31st December, 1887. | | | 31st December, 1892. | | |
|---------------------|----------------------|--------|----------|----------------------|--------|----------|
| | Persons. | Males. | Females. | Persons. | Males. | Females. |
| 0-15, . . . | | | | | | |
| 15-25, . . . | | | | | | |
| 25-45, . . . | | | | | | |
| 45-65, . . . | | | | | | |
| 65 and upwards, . . | | | | | | |

IV.—Number of deaths and average MORTALITY of the Insane in your Asylum during the ten years ending the 31st December, 1892.

V.—A Table is desired of the CAUSES of insanity in patients admitted during the same period.

It will be advisable in the compilation of this Table that you should follow as closely as possible the headings adopted in Table XVII. of the Statistical Tables, and in this connexion, any special remarks as to the causation of insanity in your district that your information and experience may suggest, will be very valuable.

In immediate connexion with the question of causation by HEREDITY, it is to be observed that it has been very strongly contended that a distinct increase under this head is traceable to the improved and more successful system of Asylum treatment of recent years, and that it therefore becomes a matter of the utmost importance that you should, in your report, throw on these points such additional light as may be suggested by any specific facts that have come to your knowledge—such as the admission of patients descended from former inmates of the asylum who had been discharged recovered.

A further point of interest and importance in connexion with the question of causation is that relating to the influence exercised in this respect, either by the abuse of ALCOHOL, or any recent changes that have taken place in the habits or DIETARY of the people—and any observations which you may be in a position to offer with respect to this we shall be very glad to receive.

VI.—EMIGRATION having been represented to be, in its indirect effects, largely accountable for the increased number of admissions to the Asylums in recent years, it becomes very important to ascertain, with precision, how the actual facts stand as to this; and you will probably be able, without much difficulty, to say how far, in the case of your district, the removal in this way of the wage-earning members of families has been followed by the transfer to the Asylum of mentally affected persons previously maintained in their own homes.

VII.—As it is the wish of the Government that the information called for by them in this matter should be in their hands before the commencement of the Parliamentary Session of 1894, it is particularly requested that your report may be forwarded so as to reach this office on or before the 30th instant at the latest.

We are, sir,

Your obedient servants,

GEORGE PLUNKETT O'FARRELL,

E. MAZIERE COURTESAY,

Inspectors of Lunatics and Commissioners
of Control.

To Resident Medical Superintendent,
District Asylum.

ARMAGH-
ASYLUM.

ARMAGH DISTRICT LUNATIC ASYLUM.

Armagh, 1st January, 1894.

GENTLEMEN,—In answer to your request of December 7th, calling for a special report upon the alleged increasing prevalence of insanity, I have the honour of submitting the following statement as to my own district, which is the entire County of Armagh :—

After accurate inquiry and reflection upon my own experience here, and after a careful study of the statistics which accompany this report, I have come to the conclusions—(1) that there is an undoubted increase in the number of the insane; (2) that there is a greater tendency to insanity in the district, and that therefore the increase is real, and not merely apparent. I shall first state the reasons put forward in favour of the opinion that the alleged increase is only apparent, and the grounds on which I am compelled to reject those reasons as inadequate and inconclusive.

1. That there is a diminishing death-rate among lunatics, owing to the better care and treatment afforded them in modern times in asylums. This is true within limitations, as, for example, if we compare the last half of the decade 1883-'92 with the first half, we find the death-rate in this asylum diminished by almost 50 per cent. But, though true, this is irrelevant to the matter in hand. For the real question is: Is there an increase of first admissions? Now, during the first half of the decade, the number of first admissions was 339, and during the second half the number was 421, giving an increase of 82, or an annual increase of about 7 during the whole decade. This one fact is to my mind conclusive as to a real increase in the tendency to lunacy in this district.

2. It has been alleged by the most eminent authorities that the Parliamentary Grant of 4s. per head has induced persons to send their lunatic friends into asylums, and gives a premium for every pauper lunatic put into an asylum. Now, it may be conceded that the Grant has a bearing on the accumulation of patients when once admitted, but the real question is—what bearing has it on first admissions? Practically none. For the fact of the Grant is unknown even among people in towns, and much more in the backward parts of the county from which, as I shall show, the great majority of the insane is drawn. As to the alleged facts that the parochial authorities, to relieve local rates, are more ready to send pauper lunatics from workhouses to the asylums, the returns from my district fail to corroborate the statement. The returns show that the first admissions during the first half of the decade 1883-1892, the parish authorities sent 43, and in the second half they sent 28. Although it is during this second half that the great increase has been in first admissions, little influence, if any, must be therefore attributed to the Grant as a means of swelling the number of patients admitted for the first time.

3. It has been alleged that the growing emigration has indirectly (by removing the healthy and leaving the weak and defective), the effects of increasing the number of the insane relative to the population. In opposition to this, I hold that emigration has been a secondary factor in producing not merely a relative but an absolute increase. The bread-winning class, the support of family life and comfort, being withdrawn, those who are less able to make provision for themselves, or to face the

responsibilities of life alone, are left behind. These latter are thus rendered more open to mental depression and its attendant evils. On the other hand, too much weight must not be given to this factor. For it is a characteristic of Irish emigrants that they have a great love for home, and distance, as a rule, helps to endear it to them; they do not forget their friends in the "old country," but send back part of their earnings that they may be kept in comfort. The asylum is the last resource; for among the humbler classes there is still a feeling, to be accounted for by the native pride of the Irish people, against sending a friend to the asylum.

4. It is alleged that the increase is apparent because of a greater tendency to send mentally afflicted persons to the asylums than formally prevailed owing to better treatment given in these institutions. But no proof of this position has been given. Speaking from my own experience I regret to say that, in this neighbourhood at least, there is still a stigma attaching to asylum life. There is the utmost reluctance to send a person to the asylum as, even after recovery, such a person is viewed by his neighbours in a somewhat dubious light. The poorer classes unhappily conceive of a refuge for lunatics, as if it were a half-way house to prison. Further, were the tendency alleged real, we should expect it chiefly to show itself among the fairly intelligent parts of the population, whereas in reality, the increase of first admissions is, as I have said, among the least educated classes of society.

I now come to the question of causation. Granted that, as I contend, the increase of insanity is real, what weight are we to attribute to the influence: (1) of Heredity; (2) of Alcoholism; (3) Dietary?

(1) As to Heredity: it is of course a common place to say that insanity is frequently an inherited disease; but the fact to be borne in mind is, that heredity is only a predisposing cause, the main question touches the exciting cause. In this asylum during the decade 1883-92, twenty-two patients were admitted who had insane fathers and 38 who had insane mothers, which would seem to show that maternity was a stronger factor than paternity in hereditary lunacy; but as to the allegations that the increase has been due to a more successful system of asylum treatment, I do not find any support for this opinion in the returns. In this asylum during the past ten years three were admitted whose fathers had been treated in the asylum and discharged recovered, and two whose mothers had undergone the same treatment and had recovered, so that so far as this district is concerned no increase from this cause is observable.

2. What weight ought to be given to alcoholism as a factor in causation of lunacy? From my experience here I am compelled to deny to alcoholism *per se* the character of a directly producing cause of insanity. Alcoholism by itself often kills, as is evident from the familiar fact that the most hazardous life, from an insurance point of view, is that of a liquor seller. The average mortality of persons engaged in that occupation being 29.2 per 1000. Compare this with the average mortality of gardeners which is 10.6 per 1000. But alcoholism of itself is not a direct cause of lunacy, as witness the returns from this asylum which show that only one liquor-seller has been admitted here during the last ten years. Still I am of opinion, from the facts which have come under my own observation, that sane persons given to habitual drunkenness produce often offsprings liable to insanity, such as epileptics.

ARMAGH
ASYLUM.

3. Recent changes in dietary have an unquestioned influence in increasing prevalence of insanity. I may give an example of what I mean. A trade has sprung up within recent years which is rapidly enriching one class of the community at the expense, bodily and mental, of another class. Pedlars, not of the primitive and harmless kind, who hawked about on foot useful and necessary commodities, but of a new and higher order, may be seen on every high road, seated in gay croydons heavily laden with Indian teas, which they sell to poor people at an exorbitant profit. This leads to a distinct increase in the use of Indian tea, not as a food, but as a beverage between meals. The tea is bad, but to make matters worse it is stewed, not infused, as a consequence the use of increased amount of nervine food leads to a peculiar form of dyspepsia which in its turn, leads to a general debility of the nervous system. This change is therefore to be considered as a factor in the increase of insanity.

4. I now come to what I conceive to be the prime factor in the increase of lunacy in this district. Namely, the agricultural depression under which the country has been suffering for some years past. By far the largest number of the insane come from rural districts, and chiefly from the labouring and poorer classes of these districts. This depression has caused want of nutritious food, inability to meet pecuniary liabilities, (e.g.), loans made by semi-professional money lenders, increase of mental worry and vexation, and a gradual derangement of physical and mental functions. As convincing proof of this assertion I refer to the fact, that of the persons admitted here during the last ten years 349 belonged to the farming and labouring class, seventeen were artisans including all handicrafts, and eleven shop-keepers. This one fact is, in my view, absolute proof of the position here taken. It may be further added that the most of the 349 are of the poor straggling class, and chiefly belong to the southern parts of the County Armagh. Of these 349 there are 80 women, but even the most of these are to be reckoned as farmers, since they held land and did the usual work of the farm. In other words, the proportion relative to the population of persons admitted as insane to this asylum is 1-80th of the farming class. As accentuating the results of the agricultural depression, the recent outbreaks of influenza are having serious effects. This disorder leaves behind, in many cases, a peculiar form of permanent neuralgia in the chest or lumbar region, which nothing seems to cure; and a nervous depression (more particularly in older persons), leading to hypochondriasis and a general disinclination to bring the energies to face any emergency that may arise. This accumulation of ills upon the heads of poor peasants already overburdened with poverty, and the evils that poverty brings, proves sometimes too much for human nature, and the last straw breaks the camel's back.

In conclusion, I would beg to say that by way of counteracting the present increase of a lunatic tendency it is open to the Government to take certain salutary steps.

- (a). The gentry who are being made rich by the sale of Indian teas ought to be restricted in their lucrative occupation, and the sale of China teas ought to be encouraged.
- (b). Some help must be afforded to the poor farmers, those I mean holding from five to fifteen acres of land. It is for the political economist to say what form that help should take, whether a law of protection, or abolition of dual ownership, or the opening up of the country by railways, or the creation of new industries

(c.) Children attending the primary schools ought to get proper diet. At present they get insufficient food, and the quality is of the poorest kind. A free dinner would be a great blessing to children in poorer districts. Further, the greatest ignorance prevails as to the simplest physiological and sanitary facts. To remedy this, compulsory education on the elements of these subjects would be advantageous. The fact is the problem of the increase of insanity is a complex one, and can only be solved by attacking it on all sides. But that something must be done to keep within bounds this alarming spread of lunacy is clear. It needs no gift of prophecy to predict that if measures are not taken by the responsible authorities we shall soon have applications for admission to our asylums from a class of persons in better circumstances than the majority of those who are now under our charge.

ARMAGH
ASYLUM.

I have the honour to be, gentlemen, your most obedient servant,

WILLIAM GRAHAM.

To the Inspectors of Lunatics,
Dublin Castle.

BALLINASLOE DISTRICT ASYLUM.

BALLINASLOE
ASYLUM.

10th January, 1894.

GENTLEMEN,—In obedience to your circular of the 7th December, I beg to submit Tables, filled as accurately as our information permits.

As to the causes of the increase of insanity I fear I cannot throw much light, so many contribute to that sad result. The question of heredity as a cause comes so frequently before us that there can be no doubt of its being a very general cause of insanity in this district, and, I believe, much more so than we are aware of, numbers of patients coming from distant parts of Galway and Roscommon, of whose history it is impossible to get reliable information.

As to the question of patients admitted into this asylum, descended from former inmates who had been discharged recovered, I regret I have no specific facts or reliable information to furnish.

Alcohol, though generally supposed to be a very frequent cause of insanity, is, in my experience, not so, though often the exciting cause, the cases coming into this asylum directly traceable to alcohol are very few indeed. Indirectly, no doubt, alcohol tends to the increase of asylum inmates, through the offspring of the intemperate being liable to so many neurotic diseases.

Diet, I am convinced, has a great deal to say to the insanity of the district which supplies this asylum with inmates, a large majority of the patients coming from the remote parts of the district showing unmistakable evidence of scant and improper food, a low vitality, want of brain power, the insanity of malnutrition.

BALLINASLOE
ASYLUM.

Emigration, I consider, contributes to the filling of asylums, by taking the strong and active members of the family away, leaving the weakly in mind and body at home. A number also return with minds shattered from climate or overstrain, and end their days in the district asylum.

I regret I have no more specific and reliable facts to lay before you in the investigation of this most difficult question.

I have the honour to be, gentlemen,

Your obedient servant,

R. V. FLETCHER, R.M.S.

The Inspectors of Lunatics,

The Castle, Dublin.

BELFAST
ASYLUM.

BELFAST ASYLUM.

WORKHOUSE CASES.

It has been contended that the Treasury Grant in aid of maintenance of asylum inmates (which is not given to workhouse insane) is the cause of a considerable number of these latter being transferred to asylums. I have watched, since 1874, the development of this arrangement, and particularly its effect on the admissions to this asylum, and it is my opinion that all workhouse admissions were suitable, and were proper cases for asylum treatment. It is quite a usual custom here, if a case, lodged in the police court after official hours, shows any symptoms of mental aberration, such case is immediately examined by the police surgeon, and sent to the lunatic ward of the union workhouse. If after admission there, any further serious symptoms develop, such as nervous depression, with suicidal tendency, refusal of food, or maniacal excitement, the case is at once transferred to this institution. This is the history of a large number of the cases admitted from Belfast Union Workhouse.

HEREDITY.

There is, perhaps, no disease in which the effects of heredity constitute so important a factor as in the propagation and development of mental disease. The returns of this asylum show that 14½ per cent. of the admissions are directly caused by it, but if it be considered as a predisposing cause this calculation is rather below the actual facts, and it is as a predisposing cause that we appreciate its far-reaching potency. It is not always an easy task to elucidate the truth about heredity; it is frequently denied by the friends of the patient, and in some cases it is only after the patient has been discharged that the history is told by some neighbour, who personally knew the circumstances of the family for generations.

In this connection another important consideration arises, and that is the consanguinity of parents, and where this condition is complicated with heredity, the result is most unfortunate for the offspring. Perhaps in lunatic asylums the full effect of this evil is not demonstrated, as we know from the observations of authorities on the subject—Ireland,

Langton, Down, &c.—how this consanguinity of parents produces offspring whose intellect is undeveloped in over 46 per cent., and of these only a small proportion are admitted into lunatic asylums. It is rather a want in our system that intermediate asylums, or some such institutions, are not available for the treatment of this class.

The observation in the Circular respecting the increase of insanity due to offspring of former inmates of asylums is as true as it is interesting. It is a matter I have been investigating for a long time, and it has impressed me as a very serious cause of insanity. I have traced directly 186 cases to parentage of asylum inmates; generally one parent (most frequently the maternal), and indirectly have had information respecting 70 of such cases. If this statement be associated with the cases of indirect transmission, such as uncles, aunts, and cousins, we arrive at an estimate of the formidable part that heredity plays in propagative insanity. In addition to the foregoing the condition of Atavism in insanity should not be overlooked. As, like gout, it may skip over a generation, and consequently the figures given in the direct transmission from former asylum inmates may be largely augmented, as, though the father may, perhaps, not have been, the grandfather was an asylum inmate, and so on.

Another interesting fact—and cheering to those responsible for asylum administration—is the widespread confidence in asylum treatment now as compared with years ago, and this, coupled with the increased education of medical students in mental disease, derived from the clinical instruction conducted in lunatic asylums, gives a valid reason for the increase of asylum admissions. It is self-evident that such educational assistance to the student must prove of great value to the physician in diagnosis and certification, and we know the importance of diagnosis in the early stages of mental disease, and the satisfactory results accruing from early treatment.

And with respect to treatment, even if resulting in non-recovery, we find the average life of asylum inmates more lengthened in comparison with similar cases years ago, which may be traced to improved treatment and increased knowledge of the subject.

ALCOHOL.

There are $11\frac{1}{2}$ per cent. of the admissions to this asylum directly caused by alcoholic excess. The drink most generally consumed is whisky. There is no special observation with regard to intemperance in this locality, except that in a small proportion of cases I have traced the habit rather to being a neurosis in the earlier stage of the attack, so that the intemperance was an effect, not a cause, of the insanity. These cases, however, are too few to make any material reduction in the per-centage given above.

DIETARY.

It is very apparent, especially in factory workers admitted from the city, that insufficient or unsuitable dietary is a cause of insanity; the anæmic physical condition accompanied by mental depression with suicidal tendency, indicating brain starvation and mal-nutrition. This statement is borne out by the satisfactory treatment, by the exhibition of generous and nutritious diet—such as eggs, milk, beef tea, &c., with ferruginous tonics. The information obtainable respecting the dietary of this class clearly indicates the causation of the mental condition; the diet of the factory workers consisting chiefly of tea, with bread and butter, and only small quantities of animal food, meat, fish, eggs or milk.

BELFAST
ASYLUM.

It must also be noted that the tea is not the ordinary infusion, but is a decoction. These patients inform me that they commence work at 6 o'clock, a.m. Before leaving home they take some tea which has been prepared over-night, and has been drawing from bed-time (10 o'clock, p.m.) until the morning. The small tin is again filled with new tea, and placed on a stove in the factory, to draw from 6 o'clock to 8.30 o'clock for breakfast, and the same operation is repeated for dinner, at 2 o'clock, as it is very rarely they have soup for dinner.

When this class of food is taken into consideration, together with the length of the working hours in factories—usually from 6 a.m. to 5.30 p.m., breathing an atmosphere damped and surcharged with steam (required for manufacturing purposes); clothing generally insufficient; exposed to such variations of temperature in going to and returning from work; and the home, perhaps untenanted all day, being dreary and cold, it is not to be wondered that the constitution of these individuals is weakened and run down, and melancholia from imperfect brain nutrition, phthisis, or some such disease should supervene. Another serious fact is, that in the case of the married female factory workers, they are unable to nurse their children and either give them in charge to a neighbour, or leave them in a day nursery—if able to pay the maintenance charge—and again, they will endeavour to extend the period of lactation to prevent conception, so that it comes to pass that not alone the natural constitution is exhausted, but a potentiality is induced in the child which may develop tubercular, scrofulous, or brain disease.

EMIGRATION.

This cause would show its importance in the tendency to depreciation both in the mental and physical organization by the loss the country sustains where a large proportion will leave, and these comprising the young, healthy, and energetic, consequently the residue will be of a larger proportion of delicate individuals, and those either in middle or advanced years. Now, the inter-marriage of these delicate persons, as well as marriage of disproportionate age, is a well ascertained factor in causation of some neurosis. The effect of persons being left without support or care when other members of the family have emigrated, would be felt more in the admission of weak-minded or demented persons into work-houses. Again, especially in city residents, there are cases where the members of the family are employed all day (female as well as male), consequently the house is untenanted during the day, and there is no one to care the weak-minded relative. Also in the case of asylum patients degenerating into secondary dementia, where if any person remained to care them at home they would be suitably and comfortably provided for; for the same reason these classes of insane cannot be moved from the asylum by their relatives, and are generally transferred to the lunatic ward of the workhouse.

From returns I have received from the Medical Superintendent of Health in this city, it would appear that the average number of emigrants leaving this port at Belfast during the past ten years was 3,500, but I have no data to show how many of these belong to County Antrim, and as many emigrate from Counties Down, Antrim, and Monaghan, passing through and sailing from Belfast, I cannot give actual figures as to the district.

(Signed),

ALEX. S. MERRICK, M.D., R.N.S.

CARLOW DISTRICT LUNATIC ASYLUM.

CARLOW
ASYLUM.

Adverting to paragraph V., which deals with the cause of insanity, I cannot report any case admitted here as the offspring of patients who had been under treatment in this asylum.

As to the abuse of alcohol, there have been cases undoubtedly owing to the above, and in some instances of short duration. If more efficient nursing was supplied to the union hospital, some of the above might be with success treated there and thus saved the slur on their character of having been an inmate of a lunatic asylum.

In connection with the question of dietary, amongst the labouring classes of late years a great change has occurred. Oatmeal porridge for breakfast, potatoes and milk for dinner, with occasionally bacon, being almost totally discarded for tea and bread, sometimes with butter, for breakfast, and tea with bread and a bacon rasher for dinner, the latter not always to be had. I am informed by the agricultural class that the potatoes now grown are not of as a nutritious quality as those produced some thirty years since. With this large increase of consumption of tea due I believe to its cheapness, much more tobacco is consumed, both of which tend to induce nervous debility, and as well many forms of gastro-intestinal derangement, especially so when the manner in which tea is prepared by the working class, *i.e.*, a rather concentrated decoction instead of a short infusion, is considered.

A striking instance of the above came under my observation some time since. A young girl, a National Board school teacher, working all day in a badly ventilated and rather crowded school, was reading during the evenings to qualify herself for a higher grade, her parents being poor she had to live almost entirely on tea and bread, seldom butter. This mental strain and insufficient dietary told its tale. Epileptic seizures and consequent mania developed, but which under the influence of rest and nutritious diet, quite passed away, and has not since recurred.

With regard to mania due to the destitution caused by emigration of the wage earning members of families, I cannot trace any cases here as thereby caused.

(Signed), THOMAS P. O'MEARA, Res. Med. Superintendent.

Board Room, December 30th, 1893.

CASTLEBAR DISTRICT LUNATIC ASYLUM.

CASTLEBAR
ASYLUM.

District Lunatic Asylum, Castlebar,

28th December, 1893.

GENTLEMEN,—In reply to your circular of 7th inst, I beg to say, in the first place, that the facilities for obtaining information as to material facts bearing on the matter are meagre, as the usual histories given in warrants and forms of admission are generally of little or no value; friends appearing to be always reticent as to former cases of insanity in their families; but no doubt can exist that family taint is a large factor in the production of insanity, as numerous degrees of relationship exist amongst the patients of this asylum.

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CASTLEBAR
ASYLUM.

No doubt the abuse of alcohol has been in many cases more or less the exciting cause of insanity, especially when a particular form of alcohol is used, and which frequently leads to sudden maniacal excitement.

Amongst the female inmates, I believe many cases of insanity may be attributable to the frequent consumption of decoction of tea, taken generally without food, and for lengthened periods.

The dietary of the people has changed considerably, as tea and bread are now generally substituted for the former dietary of porridge, milk, and potatoes.

Tea carts with agents for its sale can now be seen driving through every district in the country and supplying the great demand for this article to the people.

I can only form a conjecture which is, that I believe various insane people have within recent years been much more extensively transferred from their homes to the district asylums, the people having learned the great advantages of these institutions, and losing their former morbid dislike to lunatic asylums.

And, again, the constant drain on the healthy population through emigration, &c., &c., whereby many weak and unhealthy persons, aged and frequently weak mentally, are left behind, and then inter-marrying, tend considerably to contribute to the increased number of the insane.

I believe that various circumstances arising out of the customs, and social and political states of the community, and domestic reverses contribute largely to the moral cause of insanity.

I am, your obedient servant,

G. W. HATCHELL,

Resident Medical Superintendent.

CLONMEL
ASYLUM.

CLONMEL DISTRICT LUNATIC ASYLUM.

Clonmel District Lunatic Asylum,

December 18th, 1893.

GENTLEMEN,—In compliance with the terms of your circular of the 7th inst., I beg leave to furnish you with the Statistical Tables therein indicated as necessary to test the important question of the alleged increasing prevalence of Insanity, so far at least as this may prove to be the case in the district of which I have charge.

These Tables have been drawn up with much care, and may be relied on for general accuracy, save in the heading relating to the duration of disease, which is often imperfectly, if even at all, supplied in the warrants and forms of admission. However, I think the return will be found sufficiently accurate for all practical purposes, and I hope will meet with your approval. It is needless for me to say that if any alterations or additional Tables be deemed necessary by you, it shall be my duty to furnish them without delay, and with such care and accuracy as the nature of so important a subject demands.

You are good enough to intimate that you would not be averse to receive any remarks likely to throw light on the undoubted fact of the increase of recognised and known cases of insanity coming under cure. I do not think, however, that the limited area of any one district qualifies the Medical Superintendent to give any but a crude and

best theoretical opinion on a subject of such imperial significance; and personally I would have much diffidence in doing so, even were it in my power, knowing that when you, as heads of the department, have these returns from all parts of the country before you, you will be in a position from your superior standpoint to submit a valuable and reliable report to the executive on the subject.

Nevertheless I take the liberty, as one who for over a quarter of a century has been connected with the treatment of Lunacy, to call your attention to my Annual Report to the Governors of the Clonmel Asylum for 1889. There I briefly allude to the problem—at that time beginning to agitate the public mind—of increased asylum population in face of the decreased general population. I regret I did not at that time enter into the matter more exhaustively, but I observe that since then, in his Annual Report of the Royal Edinburgh Asylum for 1892, that eminent writer and Psychologist, Dr. T. S. Clouston, has handled the subject in his characteristic manner, and with his views I think the majority of thoughtful medical men will concur. A low death rate (remarkable in Irish asylums as compared with those of other countries), therefore accumulation; increased longevity, improved appliances, confidence of the public, inducing a class of people to seek relief for their afflicted relatives in those asylums who never would have dreamt of doing so twenty-five years ago; the slow but sure operation of the Act 30 and 31 Vic., c. 112; and lastly *the advance of civilisation which leads to the adoption of more humane and liberal views*—all these causes lead to an increased demand for asylum accommodation, and to my mind account for the multiplication of lunatic asylums throughout the civilised world.

I must ask pardon for this digression, and will conclude by addressing myself to the question of causation as it relates to this district. It may be seen by reference to Table VII. annexed, that by far the greater number of cases of the disease are owing to heredity, and in Table VII. I have enumerated those very closely related who are inmates of this asylum. There are, besides, others of more distant degree who, perhaps, ought to be included under "hereditary influences."

In this county of Tipperary, as is probably known to you, there exist clans and factions, perhaps more than in any other county of Ireland. As one example, the factions known as the "Three-year-olds" and "Four-year-olds" have not yet died out, and sometimes meet in deadly feud at market and fair. The Dwyers, the Mahers, the Ryans, the O'Briens are much given to intermarrying. If a "boy," say of the Ryans, were to "keep company" with a girl, say of the Mahers—should these clans belong to opposite factions—he would be "taboo" to his neighbours—hence the "Dwyers," the "Ryans," the "Mahers," the "O'Briens," &c., keep very much to themselves, and marriages of consanguinity are frequent.

Next to heredity our returns show that the abuse of alcohol is the chief factor of causation; but I cannot help thinking that this heading might well be altered to the use of *abused* alcohol, for the drink sold, at all events in the humbler class of public houses, is adulterated to an alarming extent, and the majority of those who frequent these houses, I have observed, are rendered temporarily insane, not, I believe, by means of the quantity but the quality of their potations.

The dietary also of the people has undergone a change within the last 25 years. How far tea—which is now used as an article of diet at almost every meal, where formerly it was a luxury seldom to be indulged in—has an influence in weakening the physical health of the

CLONMEL
ASYLUM.

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community, thereby inducing insanity, must only be conjectural. The physician can easily see how this may be the case, and I have a strong suspicion that tea *does* play a part in the production of the disease.

I know of no case sent to this asylum owing to the emigration of the wage-earning member or members of the family, which otherwise would have been kept at home, nor can I hear of any, although I have made pretty extensive inquiry throughout the district from clergymen and others likely to be acquainted with the people. It would be but natural to infer, however, that emigration, which has been draining the country of its bone and sinew for half a century, leaving behind the starvelings to propagate the species, *must* have had its effect in degenerating the race amongst the bumbler classes of society especially. Is then the increasing prevalence of insanity, in face of a diminishing population, to be wondered at?

Submitting these observations with the utmost respect,

I have the honour to be, gentlemen,

Your obedient servant,

W. H. GARDINER, R.M.S.

To George Plunkett O'Farrell, Esq., M.D., and E. Maziere Courtenay, Esq., M.B., Inspectors of Lunatics and Commissioners of Control, &c., in Ireland.

CORK
ASYLUM.

CORK DISTRICT ASYLUM.

District Asylum, Cork,

28th December, 1893.

GENTLEMEN,—In reply to your circular of the 7th inst., I now beg to submit the enclosed tabulated returns; from these it is apparent that if the number of first admissions be taken as the main test of the progress of insanity, there has been no increase in the county during the last ten years. The average number of first admissions has been 213, the number admitted in 1883 (the first year of the decade) was 211, and the last year (1892) 203, the re-admissions were below the average for the first four years, and above for the years 1888, 1889, 1892.

The number of insane under treatment in the asylum has increased from 1-520 in 1883 to 1-491 in 1892, or if we add the inmates in the workhouses of the County, from 1-385 to 1-271.

The total number admitted are accounted for as follows:—

| | | | | | |
|---------------|---|---|---|---|-----|
| Recovered, | - | - | - | - | 367 |
| Relieved, | - | - | - | - | 158 |
| Not improved, | - | - | - | - | 23 |
| Died, | - | - | - | - | 172 |
| Remaining, | - | - | - | - | 28 |

Table 2 A, which deals with the length of disease prior to admission—in first admissions—shows that out of a total of 2,142, 1,112, or 52 per cent., had been insane for less than three months; 314, or 14 per

cent., less than twelve months; and in 356 cases, or 16 per cent., the disease had existed for more than twelve months prior to admission; in 360, or 16 per cent., the length of disease was unknown.

Of the 526 cases admitted from the workhouses 443 were first admissions, 280 or 53 per cent. of the whole number were insane for less than three months, in this county, therefore, a good number of those sent in from the workhouses had a fair prospect of recovery.

Table 3 shows that the average age of those in the asylum at the end of 1892 was greater than five years previously, 310 per thousand being in 1892, between 45-65, against 269 in 1887. This, however, is easily accounted for by two facts: (1) A greater portion of young people now leave the country than formerly (in 1883 by the Board of Trade returns 88 per cent. of the emigrants were under 35; in 1891, 92 per cent.) (2) Table 4, shows that there has been a considerable falling off in the death rate, the average for the ten years being 9 per cent., the average for the first five years 11.3 per cent., and for the last five 6.8 per cent.

I regret that the information as to the causes of insanity is very unreliable, owing to the imperfect and very inaccurate information supplied on the committals; 83 per cent. of the patients are brought to the asylum by the constabulary only, who, as a rule, know little about them. I am satisfied that intemperance or abuse of alcohol is a far more frequent cause of insanity than is assigned, and hereditary predisposition is always reluctantly acknowledged by the friends, and should hold a much more prominent position as a cause of insanity than it does in these returns.

It is difficult to prove, but I have long been of opinion, that the free discharge of weak-minded but harmless patients and the too early removal of those recovering has tended to increase considerably the number of insane who break down from heredity. I have endeavoured to prove this, but the history received with the patients is too indefinite to come to any positive conclusion.

A considerable change has taken place in the dietary of the small farmers and labourers in this district during the last ten years. Milk, stinabout, and potatoes are far less used, while meat (to some extent), bread, tea, and porter have increased in consumption, but it has had no material effect on the causation of insanity. In conclusion, I don't believe that emigration has materially increased the number of admissions to asylums, and although the insane under treatment have increased in proportion to the population in this county, there is no increase in the number primarily attacked.

I am, gentlemen, your obedient servant,

OSCAR WOODS, Med. Supt.

To the Inspectors of Lunatics, Dublin Castle.

DOWNPATRICK DISTRICT LUNATIC ASYLUM.

Downpatrick, 23rd December, 1893.

GENTLEMEN,—I beg to forward herewith Tables drawn up in compliance with the request contained in your circular of the 7th inst.

As you are aware my local knowledge is necessarily very limited, as my appointment dates but some three months since, but with the assistance of the Clerk (Mr. Rea), I am able to place before you the statistics

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you require, as well as some other figures, which possibly may be of value in the consideration of the subject of investigation.

I would briefly remark with reference to the points of your circular, I. That the average numbers resident for the ten years (1883 to 1892) progressively increased, yet the number of "first admissions" gradually decreased.

II. (a). The question of "duration" is very doubtful and cannot be regarded as accurate. (b). There have been no transfers. (c). The cases unsuitable for detention in workhouses, and sent here for treatment, have increased each year. It is a matter of regret that the majority of such cases have been so long deprived of the treatment necessary for acute cases; many have been years in the workhouse wards.

III. The proportional age of the patients resident points to a gradual rise from fifteen to forty-five, and a gradual decrease from forty-five to old age.

IV. The exceptionally high death rate in 1883 was due to an epidemic of pneumonia and dysentery.

The increase noted in the years 1890-1892, is due to pulmonary diseases arising out of the influenza epidemic.

V. The causes of insanity cannot be regarded as strictly accurate. It may however, be safely taken as indicating the broad lines of causation, viz: hereditary and intemperance, which give the highest totals. Cases due to previous attacks and unknown cases are no doubt largely due to the same sources. From my limited knowledge of the locality, I am inclined to think the numbers given under hereditary is very considerably under-estimated. In one district of the county inter-marriage of neurotic individuals is very frequent. I can find no such case, however, in the admission of a patient whose parent was discharged recovered, prior to the birth of the former.

Alcohol. Though a fair proportion of cases admitted yearly are ascribed to this cause, I am not aware that there is any point of special interest in this connection.

VI. With regard to emigration I have drawn up a table (No. VI.), showing the proportion of emigration per 1,000 yearly of the population to the number of "first admissions." It will be noticed that the higher the emigration rate the higher the first admission rate, and the reverse. In this county, as elsewhere, the emigrants are drawn from the ranks of the young and robust, who in many cases leave aged and feeble relatives.

It is important to note that in framing this table the figures taken representing the annual population were not those estimated as such in the statistical tables. The population was taken as 269,000, the average of the population of the County Down for the ten years ending 31st December, 1892, based on the census returns of 1881 and 1891. (See page 629, of Thom's Directory, '93).

I have the honor to be, gentlemen,

Your obedient servant,

M. J. NOLAN, Res. Med. Supt.

The Inspectors of Lunatics,
Dublin Castle.

ENNIS DISTRICT ASYLUM.

ENNIS
ASYLUM.District Lunatic Asylum, Ennis,
23rd December, 1893.

GENTLEMEN.—I have the honour to submit herewith, in compliance with your Circular Letter of the 7th instant, Tables in reference to the admissions, discharges, deaths, &c., during the ten years ending 31st December, 1892.

It will be observed that there has been a steady increase in the asylum population during that period, for which, I think, the following are some of the reasons.

(1.) A great many persons formerly at large, or residing with their friends, are now placed under control either in the insane wards of workhouses, or their district asylum.

I am of opinion that the prejudice against asylums which existed amongst a class of the people some years ago, has largely disappeared, and owing to the improved and successful treatment of the insane of recent years, these institutions are much more availed of now than heretofore.

(2.) I believe the principal cause of insanity in this county is hereditary influence, particularly along the sea coast, whence the majority of our patients are admitted, inter-marriages amongst relatives being numerous, owing to the social facilities for mixing with strange families being, of necessity, curtailed.

(3.) The excessive use of alcohol, and of an inferior quality, such as "potheen" whiskey, of which I understand a quantity is consumed, has, I have no doubt, been the cause of insanity in a large number of cases.

(4.) The disturbed state of the county for some years past has, I consider, been the cause of mental derangement in many instances.

The causes of insanity given in Table V. are taken chiefly from the admission papers, which I frequently find are unreliable with regard to this important information, and in many cases no cause is assigned.

There are not any persons in this asylum descended from former inmates who had been discharged recovered, but considering that the institution is only twenty-five years opened it does not follow that such may continue.

I am not personally aware of, nor can I trace, any cases of transfers of mentally affected persons, previously maintained in their own homes, to the asylum, owing to the emigration of the wage-earning members of families, however, such is quite possible, as emigration has been considerable from this county, and possibly some cases may have drifted in consequence to the workhouse, and thence to this institution.

I have the honour to be, gentlemen,

Your obedient servant,

R. P. GILSTON,
Resident Medical Superintendent.

To

The Inspectors of Lunatics,
Dublin Castle.

REPORT ON THE INCREASE OF INSANITY IN THE COUNTY OF WEXFORD,
in conformity with the instructions contained in a circular letter
from the Inspectors of Lunatics, dated 7th December, 1893.

I may premise at the outset that in what follows I have endeavoured to keep as closely as possible to the lines indicated in the circular, but, as will be seen in the body of the report, some of the points on which inquiry is suggested will be found to have little or no bearing upon the question under consideration (except in a negative way), and with respect to others the amount of information available is so meagre that any opinion founded on it can hardly be looked upon as other than conjectural. For the sake of simplicity round numbers are given as a rule, or very simple fractions, which, though not absolutely correct, deviate from accuracy only to an inappreciable extent.

I. As regards the admissions, there has been a notable increase in these during the decade ending 1892 over those of the previous decade, 740 cases were admitted during the former period, as compared with 598 during the latter, an increase of 142, or 23·74 per cent.

During the first half of the period under review 353 patients were admitted; during the second half, 387; an increase of 34 patients, or close upon 10 per cent. The increase in admissions is therefore a progressive one.

The discharges during the same period were 462, or 62½ per cent. on the admissions. The numbers, like those of the admissions, are progressive. The discharges during the second half of the decade being nearly 13 per cent. over those of the first half (245 and 217 respectively).

The deaths increased also, but in a lower ratio, those for the first half being 90, and for the second 97, an increase of about 7½ per cent. They give a proportion of 25 per cent. on the admissions for the entire period.

The discharges and deaths together, therefore, account for 87½ per cent. of the admissions, the residue, or 12½ per cent., representing a probably permanent addition to the population of the asylum.

The number resident on 31st December, 1882, was 309, and on same date, 1892, 400, an increase of 91, or 29 per cent.

The daily average during the same period rose from 309 to 388½, an increase of 79½, or over 25 per cent.

The population of the County Wexford during the period 1881-1891 decreased by 12,000, or 9½ per cent. In 1881 the daily average of insane in the District Asylum was 302, with a population of 123,854, which gives a proportion of 1 in every 410 persons insane, or 2·44 per 1,000. In 1891 the daily average was 385, with a population of 111,778, giving a proportion of 1 in every 290 persons insane, or 3·45 per 1,000. These figures are, of course, exclusive of the insane in work-houses or elsewhere, which, if included, would raise the proportion still higher, and if idiots be added it will bring it up to 6 per 1,000.

II. (a.) The first admissions during the decade ending 1882 were—males, 278; females, 234; total, 512. In that ending 1892—males, 310; females, 244; total, 554; or a percentage increase of—males, 11½; females, 4½; total, 8½. The first admissions during the quinquennial period ending 1892 outnumber by 34 those of the previous one (ending 1887), denoting an increase of 12 per cent. The increase in first admissions is consequently progressive.

As regards the duration of the disease in first admissions, in 289 out of a total of 554 it had lasted a period of three months; in 100, over three and under twelve months; and in 160, over twelve months. ENNISCORTHY
ASYLUM.

Taking the quinquennial periods ending 1887 and 1892 respectively, the admissions of those affected under three months rose from 136 in the first to 153 in the second period, or an increase of $12\frac{1}{2}$ per cent. The cases affected over twelve months rose from 66 to 94, an increase of $42\frac{1}{2}$ per cent. The increase in chronic cases was, therefore, much greater than in the acute.

(b.) Only two transfers occurred during the period under consideration, both in the year 1888.

As regards congenital idiots 15 were admitted during the first five years of the decade, and 13 during the remainder.

The number of transfers and congenital idiots, therefore, cannot be said to have any bearing upon the question of the increase of insanity.

As regards the readmissions, however, the increase in them has been very large, in fact, in quite an overwhelming proportion over that of first admissions; the increase over the re-admissions during the previous decade being, males $108\frac{1}{2}$, females $126\frac{1}{2}$, total $116\frac{1}{2}$ per cent. During the two quinquennial periods of the last decade, however, the readmissions were precisely the same, 93 in each.

(a.) With respect to workhouse patients the admissions have more than doubled in the last decade as compared with the previous one, the numbers being 133 and 62 respectively; an increase of $114\frac{1}{2}$ per cent. Comparing the two quinquennial periods of the last decade 57 workhouse patients were admitted during the first, and 76 during the second, an increase of $33\frac{1}{2}$ per cent.

As regards the duration of the disease in workhouse patients the number of cases in which the disease had lasted under three months increased from 31 in the 1882 decade to 59 in the succeeding one, an increase of 28, or over 90 per cent. The number of cases affected over twelve months advanced from 17 in the earlier decade to 54 in the later one, an increase of 37 or $217\frac{1}{2}$ per cent. Cases in which the attack was over three and under twelve months duration were the fewest, viz.—9 for the first decade, and 20 for the last, representing an increase of 122 per cent.

The increase in workhouse patients, therefore, is one of considerable magnitude, and was most notable in the chronic cases.

III.—*Proportional Age distribution* on 31st December, 1887, and 31st December, 1892, respectively.

The changes in this respect are not such as to warrant any deduction whatever. The proportion of patients at the middle period of life (25 to 45) was precisely the same at the end of the two quinquennial periods, viz.: 445 per 1,000; but the proportion of males at that age decreased by 18 per 1,000, whereas the females increased by 19 per 1,000. A change in an opposite direction took place in the relative number of patients between the ages of 45 and 65, the male patients having increased at the end of the second quinquennium by 8 per 1,000, while the females at same period of life had decreased by 26 per 1,000. Figures such as these can hardly be said to have any practical bearing on the general question of the increase of insanity.

IV. Neither do the mortality figures throw much light on the subject. The percentage of deaths fluctuates in an irregular manner, and within no very wide limits, the maximum death rate during the decade ending

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1892 being $7\frac{1}{2}$, and the minimum $3\frac{2}{3}$ per cent. on the daily average; but the varying death rates between these two extremes have no progressive character in the one or the other direction. A steadily decreasing death rate would, no doubt, have some effect in increasing the resident population of an asylum, the number of survivors as chronic cases being somewhat greater than they otherwise would be, but, from the facts above stated, it is obvious that, as regards the County Wexford at least, in the problem under investigation, the rate of mortality may be ignored as affording no aid towards its solution.

V. Causes of Insanity—1883–1892.

The number of cases in which some one cause was a factor in the production of insanity varies in an irregular manner from year to year. For instance, as regards the part intemperance plays in this connection, the number of cases in which it could be alleged to have existed, with or without other causes, in each of the years of the period in question, was as follows:—19·10, 16·10, 14·15, 7·14, 12·10. In the case of the females the proportion was curiously constant, the figures being for the ten years respectively—2·3, 2·2, 2·2, 1·2, 3·0. There were greater variations in the case of the males, the numbers being 17·7, 14·8, 12·13, 6·12, 9·10. From such figures as these it is impossible to assign to alcohol any increased direct influence as a causative agent in the induction of insanity, although, after heredity, it may be regarded as preponderating over other causes.

With respect to heredity it is the only one in the entire list of causes which shows progression in the extent of its influence. During the first half of the decade under review the number of cases in which, with or without other causes, it was an assignable one was, males, 57; females, 51; total, 108; whereas during the latter half the numbers were—males, 78; females, 79; total, 157. The first figure represents a percentage on admissions of males, $28\frac{1}{2}$; females, $33\frac{1}{2}$; total, $30\frac{1}{2}$. The second, males, $37\frac{1}{2}$; females, $44\frac{1}{2}$; total, $40\frac{1}{2}$, that is to say that during the latter half of the decade there was an increased proportion of cases in which heredity was an assignable cause to the following extent:—males, 9; females, 11; and, total, 10 per cent.

This increase, however, may be more apparent than real, as there seems to be less reluctance on the part of patients' friends in latter years than formerly to admit the existence of hereditary taint; and, therefore, the apparent increase on this head may possibly be, at least in part, due to a more complete registration of the fact of heredity in individual cases. This opinion, however, is more or less conjectural, nor do I think it is competent to account for more than a small portion of the increase.

As regards the point raised in paragraph 4, on page 3 of the Circular as to whether improved asylum treatment may not be, to a certain extent, responsible for a part of the increase in insanity, I cannot say that in the County Wexford this view is supported by ascertained facts. Even if such were the case, while it is possible that in old standing asylums this cause may affect results, this asylum is scarcely long enough established to do so except to an infinitesimal extent. As bearing out this opinion, it may be mentioned that during the past three years, out of a total of 235 admissions, in only three instances was either parent of any patient stated to have been under asylum care. In the case of this county, then, any influence of this kind may be eliminated from the list of causes,

The only change of importance in the Dietary of the people that I am aware of is that tea is much more largely used as an article of diet than formerly, both by men and women. There is not much evidence of the excessive use of this beverage being directly provocative of insanity; but, I think, there is very little doubt that its too liberal use excites or aggravates a predisposition to neurotic disorders, including insanity, making the nervous system more vulnerable in regard to such maladies, by the increased excitability of the nervous system which tea undoubtedly produces. A neurotic organization may also be transmitted to their progeny by parents who drink tea to excess. Reliable information on this head, however, can hardly be said to exist, and it is not possible to form more than a general impression regarding it.

In other respects the Irish farming and labouring classes, who form by far the greater number of asylum patients, are as a rule better fed and clothed than they were 15 or 20 years ago.

VI. As to the influence of emigration on the increase of insanity, although it may, no doubt, to some small extent, contribute indirectly to this increase, I cannot but think that its effect in this way has been over-estimated. As only healthy persons, as a rule, emigrate, the feeblest both in mind and body being left behind, it seems a just inference that emigration must increase the proportion of insane to the population. During the ten years 1881-91 nearly 12,000 persons emigrated from this county, giving an average of, say, 1,200 each year. Supposing these 1,200 had remained in the county in 1891, the year of the last census, and presuming they were all sound in mind, they would have merely caused a very small reduction in the proportional numbers of the insane to the population, viz., from 1 in every 290 persons to 1 in every 293, or a fall from 3.45 to 3.41 per 1,000. This refers only to asylum patients, exclusive of idiots and insane in workhouses; but the argument applies equally whether they are included or not.

As to the circumstance of insane persons previously maintained at home being sent to the asylum in consequence of wage-earning members of the family having emigrated, I am not aware of a single case in which this occurred, but it would require a great deal longer time than has been allowed for the drawing up of this report to ascertain this with any exactitude. It is quite possible this may happen once in a way, but my impression is that it is an infrequent occurrence.

The immediate cause of the continuous increase of the asylum population is of course the preponderance each year of the admissions over the discharges and deaths combined. The conditions differ from those of ordinary hospitals, in which, if a patient does not recover, and fails to improve after a fair period of treatment, he is discharged as incurable. But in an asylum all the incurables have to be kept on as permanent patients, except a few which may be sent to the workhouse; so that, from the nature of things an asylum population must perforce go on increasing until the admissions are balanced by an equal number of discharges and deaths—a condition of things, the occurrence of which is only a remote possibility at present. Were all other hospitals for the sick conducted on the same principle (unavoidable in the case of asylums) they, too, would be rapidly overcrowded with occupants, and, like asylums, there would be an ever-recurring necessity of adding to their accommodation by structural additions. This peculiarity connected with asylum economy is one apt to be lost sight of, or, at least, not to receive the attention which it deserves.

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Another cause for the increase has been repeatedly stated, viz.: the dying out of the old dislike and prejudice with which asylums used to be regarded; and, consequently, many patients who formerly would have been kept at home at any cost are now sent to asylums by their friends, who are now only glad to avail themselves of such a resource. For this reason the increase of patients in an asylum is not an unequivocal proof of the increase of insanity in the district.

SUMMARY OF LEADING FACTS.

| | | | |
|--|---|---|---------------|
| Increase in Total Admissions over previous decade | — | — | 23½ per cent. |
| “ First “ | — | — | 8½ “ |
| “ “ “ during last quinquennium over previous one | — | — | 12 “ |
| “ Daily average over previous decade | — | — | 25 “ |
| “ Recent cases admitted during last half of period over first | — | — | 12½ “ |
| “ Chronic cases “ “ “ “ | — | — | 42½ “ |
| “ Re-admissions in last decade over previous one | — | — | 166½ “ |
| (In the last two quinquennial periods the number of re-admissions was the same.) | | | |
| “ Workhouse patients during last decade | — | — | 114½ “ |
| “ “ “ recent cases during last decade | — | — | 90 “ |
| “ “ “ Chronic cases “ “ | — | — | 217½ “ |
| “ “ “ In last quinquennium over previous | — | — | 33½ “ |
| Ratio of insane in Asylum to population of County, 1881, 1 in 410 or 2.44 per 1,000. | | | |
| “ “ “ “ 1891, 1 in 290 or 3.45 “ | | | |

In the causation of insanity, heredity takes the first place, and is an assignable factor in a progressively increasing number of cases.

Alcoholic abuse is the next most frequent cause, but does not appear to be progressively increasing.

The only known change in the people's dietary is the more liberal use of tea which tends to the development of neurotic affections, and so predisposing in some degree to insanity.

There is not evidence that emigration has contributed to anything more than a very moderate extent to the increase of the insane in this asylum.

The most important fact which this investigation has elicited is that the increase of the asylum population is mainly due to the transfer of insane patients from the workhouses, and in these the chronic cases preponderate to an enormous extent.

In the cases other than workhouse ones, the re-admissions increased in an incomparably larger proportion than the new cases.

THOMAS DRAPES, Res. Med. Superintendent.

30th December, 1893.

KILKENNY
ASYLUM.

KILKENNY DISTRICT ASYLUM.

Kilkenny, 22nd December, 1893.

Resident Medical Superintendent's observations as required by Circular of the 7th inst. :—

1. In the southern portion of the county of Kilkenny, a very large number of the inhabitants related to each other inter-marry, and it is a fact that there are more admissions to this asylum from that portion than from the northern parts of the county.

2. I do not think the time has come to be in a position to offer any opinion as to the hereditary increase being due to the discharge of recovered patients from this asylum.

3. There does not appear to be any particular increase in this county of insanity due to the abuse of alcohol.

4. As regards the habits and dietary of the people I consider there is something in the remark I have often heard, viz. : That when the people lived on strong and nourishing food as meal, potatoes, eggs, &c., there was not half the madness going as there is at present. The people have given up most of the above foods, and now live largely on tea. Personally I cannot express an opinion, but older medical superintendents might do so.

5. I do not consider emigration has caused any increase in insanity, it may have caused an increase in pauperism, but has not made lunatics. With emigration the proportion of insane to a diminished population has increased. If there had been any weak-minded members of a family the bread winners of which emigrated, it is likely they found their way to the workhouse, and such go to swell up the large number of lunatics and imbeciles in workhouses. According to Inspector's report, there were on 1st January, 1893, 12,926 insane in asylums, and 4,198 in workhouses, showing about one-fourth of the entire number were in workhouses in Ireland.

22. 12. '93.

WILLIAM Z. MYLES, Res. Med. Superintendent.

The Inspectors of Lunatics.

KILLARNEY DISTRICT LUNATIC ASYLUM.

Killarney, December 30th, 1893

GENTLEMEN,—As directed by your Circular of 7th instant, I have the honour to forward tabular statements in reply to the questions, which, together with the following remarks, I hope may aid you to some extent in preparing your report on the subjects for the Government.

On comparing the number of admissions during decennial periods since this asylum was established in 1852-'3, it becomes evident that a steady increase in the number of first admissions occurred during each succeeding decennial period. The increase of first admissions has been considerably greater during the ten years ending December, 1892, than during any of the previous decennial periods; more especially when considered as per 1,000 of the diminished population—First admissions for 10 years ending 1892, being 826, as compared first admissions ending 1882—538.

The statistics which I have examined as well as an experience of over 20 years, lead me to place heredity in its widest sense in the front rank of the various and complex causes of insanity. To give heredity its full interpretation, it must be remembered that besides the families who have several members insane, it is very frequently observed that families who have only one member insane have other members (and often a parent of the lunatic) who display a very defective type of nervous organization. There may have been no previous case of actual insanity in the family, and it is often very difficult to arrive at any conclusion as to the cause of neurotic defect.

KILLARNEY
ASYLUM.

KILLARNEY
ASYLUM.

KILLARNEY
ASYLUM.

I am informed by clergymen and others that, especially in the mountainous parts of this county, a great many marriages between relatives occur. The peasantry are badly fed, using dry bread and tea, with very little milk, and still less meat.

Tobacco is used in excess and before meals, and of late years the habit of chewing it has been adopted in addition to smoking.

Though alcohol is frequently found to be the exciting cause of an attack of mania, and I have met cases of the offspring of drunkards being insane and epileptic, yet I cannot consider that with our rural population its abuse is a very prominent cause of insanity in this district. The peasant drinks to excess occasionally at fairs, weddings, wakes, &c., but he is not a habitual drinker, rather he is a total abstainer except on such occasions. However, this occasional debauch with its consequent poverty and insufficient food to the family, probably exercises an injurious influence, and so far the abuse of alcohol must be held to be a cause.

With regard to any distinct increase in the numbers in asylums being caused by the admission into them of the offspring of recovered lunatics born after their discharge from the asylum, our records up to the present do not give any support to that view. While several instances have occurred of parents and offspring previously born having been inmates here, there is recorded only one case of the admission of a child born after the parent had been discharged from the asylum.

The remarkable increase in number of first admissions during 10 years ended 1892, as compared with previous decennial periods, must, in my opinion, as far as what may be termed the abnormal portion of it, be attributed to the increased mental strain and anxiety which the people underwent during the 10 or 12 years from financial and social difficulties and derangements.

Question V.—As to the effect of emigration, it does not appear to have caused any appreciable number to enter the asylum through being deprived of the aid and care of wage earning members of families; but returned emigrants constitute an appreciable element in the inmates of this asylum, and all the cases attributed to sunstroke, Table V., occurred in persons who had spent some time in other countries and during their stay there.

I have the honor to be, gentlemen,

Your obedient servant,

L. T. GRIFFIN, Res. Med. Supert.

The Inspectors of Lunatics
and Commissioners of Control,
Lunacy Office, Dublin Castle.

LETTERKENNY DISTRICT ASYLUM.

LETTER-
KENNY
ASYLUM.

REPORT ON the ALLEGED INCREASE of INSANITY in IRELAND as far as
COUNTY DONEGAL is concerned.

To the Inspectors of Lunatics in Ireland.

GENTLEMEN,—In accordance with the circular issued from your office on December 7th, 1893, I herewith submit my report on the above subject.

For the sake of clearness I have divided it into six parts, as follows:—

1. Introductory Remarks.
2. Statistical Tables.
3. The Chief Causes of Insanity in County Donegal.
4. The amount of *absolute* and *relative* increase in the insane population, during the decade 1881 to 1891.
5. Suggestions for the future.
6. Conclusion.

1.—INTRODUCTORY REMARKS.

On receipt of your circular I thought it but right to obtain as much information as I could from gentlemen long resident in the county, who were quite familiar with the people amongst whom they lived. I therefore had a series of the questions printed bearing on the points in your circular. I sent out copies of these questions to clergymen of all denominations, magistrates, medical men, and others. By this means I obtained a large amount of interesting information from those well able to speak from experience. Some of this information I have embodied in my report, but it would be quite impossible to quote many of the interesting answers which I received.

My thanks are due to all those gentlemen who so kindly and fully replied to my queries for the great trouble which they took. I herewith send you a copy of the questions which I issued marked A, with an analysis of the percentage of replies affirmative and negative to each question.

2.—STATISTICAL TABLES.

I enclose copies of the statistical tables which you asked for. My Statistics, thanks are due to Mr. Russell, the Clerk of this Asylum, for the accurate way in which he made out these tables, and they involved a good deal of work, as the register had to be examined carefully for the making out of nearly every table, for the ten years ending December 31st, 1892.

Table I. shows at a glance that the average admission rate has been increasing, and that the average number resident in each year has risen also.

Table II. (a) proves that the average rate of first admissions has been slowly but steadily increasing, especially during the last three years.

Table II. (b).—From this table it can be seen that the average rate of re-admissions has also risen, but perhaps this is not to be wondered

LETTER-
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ASYLUM.

at when from a glance at Table L. you can see that the discharge rate during the last three years under review was much higher than in previous years.

Table II. (c) proves that the rate of first admissions from workhouses is also rising. This, however, is not strange, as the tendency seems to be everywhere to send all lunatics from workhouses to the district asylum.

Table III.—From this table it can be easily seen that more young persons between the ages of 15 and 25 were resident in the asylum on December 31st, 1892, than on December 31st, 1887, and during the same period the proportion of old people of 65 years and upwards had diminished by more than half. This would, no doubt, prove that the asylum was being much more availed of for the treatment of the young than formerly, and we ought to be thankful for this for two reasons—1st, because those cases which are most likely to recover get a greater chance of doing so when subject to early treatment, and 2nd, those cases which never can recover are well cared for in the asylum; and more important still, they are kept out of harm's way, and cannot lead a life of vagabondage and do not drift into crime, and they have not the chance of sowing the seeds of the most hopeless and incurable forms of insanity broadcast over the country.

Table IV. calls for no comment.

Table V. tells the truth as far as it goes that heredity is the chief cause of insanity in this district, but in this direction it does not tell all the truth, as I hope to show.

3.—THE CHIEF CAUSES OF INSANITY IN COUNTY DONEGAL.

Heredity.

From a glance at Table V. you will observe that in about half the cases admitted yearly to this asylum the cause of the insanity is stated to be "unknown." We all know what a great objection there is to the admission of the fact that insanity is in the blood of any family, no matter in what rank of life the family may move. The friends of the patient deny such an imputation on the previous history of the family point blank, often in the face of positive proof to the contrary.

This great objection accounts for the majority of the cases admitted here under the head of "unknown" causes.

From my own observation and from information from many sources I am afraid I do not exaggerate when I say that at least seven-eighths of the cases admitted here from "unknown" causes might, with truth, be returned under "heredity influence" as the chief cause. Besides that in those admitted here where various "moral" or "physical" causes of insanity were returned in the register opposite their names, I am almost certain that these were the "exciting" causes in many cases, but that behind them was the one great "predisposing" cause of heredity; 86½ per cent. of the replies to my question on this point were affirmative.

Backed up by this consensus of opinion, which confirms my own, I am quite convinced that in 70 per cent. of the cases admitted to this asylum heredity is the chief "predisposing" cause of the insanity.

In reply to my query 1 (b), on which subject you ask for information, 17½ per cent. of my informants reply in the affirmative, and 82½ per cent. in the negative. One Parish Priest writes:—"I do not. They never get married, and there are no illegitimate children in this parish."

As far as my own knowledge goes, my answer must also be in the negative. Of course many men and women are admitted here who have young families, and although these parents may be discharged "recovered," yet their children cannot be included under this question.

Bearing on the question of "heredity," I thought it well to ask question 1 (c.) Forty-six per cent. of the replies to it were in the affirmative, and 54 per cent. in the negative.

I am afraid that these marriages, where the taint of insanity is in the stock, are chief causes in the spread of hereditary insanity in this district.

One medical man writes, in reply to this query:—"Yes, and in certain townlands especially notorious for intermarrying and insanity." A clergyman writes:—"If there be money in the question, or a farm, insanity would not be considered."

When the stock is sound mentally and physically, I believe intermarrying between blood relations has little to do with the spread of insanity.

In proof of this I would quote the case of the inhabitants of Tory Island.

Here we have an island in the Atlantic cut off for weeks often at a time from communication with the mainland.

It is three miles long by a mile in breadth, and contains 785 statute acres. About 60 families inhabit it, consisting of 348 persons, 160 males and 188 females, at the Census of 1891; an increase of 66 persons since 1881. I have the authority of the respected parish priest, the Rev. James McFadden, F.R., of Glenties, for the following interesting and instructive statement concerning Tory Island:—

"I have known its people most intimately for nearly forty years. It is nine miles distant from the mainland. Intermarriages amongst relations are of absolute necessity, and yet during those forty years I have known only one lunatic, J. C. (3,260), now in your asylum, to have turned up in the island There are no imbeciles, epileptics, or idiots amongst the Tory Islanders."

My own experience here points to this cause as a very small one in the spread of insanity in this district. From January 1st, 1890, to December 31st, 1892, I am certain that only 4.65 per cent. of the cases admitted during that period were cases where alcohol could by any chance be the cause of the insanity, and in at least 3 per cent. out of this 4.65 per cent., I am sure abuse of alcohol was the "exciting," and not the "predisposing" cause. In fact, I would be inclined to say that this district is exceptionally free from cases of alcoholic insanity, and would compare favourably in this respect with any district in Ireland. No doubt 60 per cent. of the replies received by me on this point differ from me, but the gentlemen who furnished these replies I take it meant to imply that they considered the abuse of alcohol a cause, but at the same time they did not regard it as a common cause.

In fact, the vast majority of the replies stated that drinking was not nearly so prevalent in the country now as formerly, and that excessive drinking was only occasionally indulged in at the monthly fairs and markets, and they further lay the blame on the adulterated stuff sold as whiskey all through the country with impunity, and, as one clergyman writes, "No one seems to cure."

The Venerable Archdeacon Cox, of Glenties, writes:—"The use or abuse of alcohol did not appear as an agent in any of the cases which have come before me now for thirty-five years, except I think in one or two at the most." His opinion, I consider of great value, as

LETTER-
KENNY
ASYLUM.

Habits and
dietary.

hacking up my own, for he is a gentleman of long experience in the county, both as a clergyman and magistrate.

How far changes in the habits and dietary of the people may cause an increase in the insanity prevalent in this district I have no figures to prove. As far as I can find out, no great changes have taken place in the habits of the people in recent years, except it be the rage for dress which seems to prevail amongst the females chiefly, and they often, I fear, adorn their backs and heads at the expense of their stomachs. Marked changes have taken place, however, in the dietary of the population, and, with some few exceptions, the opinion is pretty general that the changes have all been for the worse. The chief changes I allude to are the falling off in the consumption of farm products, such as oatmeal, eggs, milk, and home-made bacon, and the substitution for them of tea and white bread of a poor quality. As to the consumption of tea, it seems to be enormous, and increasing rapidly all over the country. I am informed that it is taken by old and young alike, and even by babes in the cradle. It is drunk as often as it can be got, at every meal and between meals, often six times a day, and especially by females, and usually without milk, and often without food. I may safely say that it is never taken as an infusion, but is generally stewed for hours, the old leaves being left in the teapot, and fresh added as required.

In some places I am told the way the tea is made is by putting the leaves down in a saucepan of cold water and then boiling it until the decoction is black enough to be palatable. Milk is not always taken with it, and I am sorry to say that milk seems to be a rare article of food all through the district. I can speak from practical experience of the terrible effects of this system of tea-drinking among both the sane and insane. It gives rise to a severe form of chronic dyspepsia, and if persisted in, to dyspepsia of an incurable and painful form. The result of all this is, that the health of the people all through the county is deteriorating more than most people imagine. In fact the people are starving themselves on tea, and the weaker they become the more they rush to the teapot for the fillip the draught therefrom may give them for the moment. This tea-drinking is becoming a curse, and the people are developing a craving for tea just as great as that which a drunkard has for alcohol, or a drug-taker for his own particular drug.

There is no manner of doubt but that the condition of bodily health affects the mental health of every man, woman, and child, and if the stomach becomes a prey to chronic dyspepsia the chances are very great the mind will, before long, be materially affected, especially where there is a predisposition to insanity of a hereditary type. It is a great pity that articles of home production, such as oatmeal and milk, are not more frequently used in the diet of the population. I am a firm believer in oatmeal, and if the children could only get it in fair quantities for a generation or two I believe the race would improve mentally and physically.

In this opinion I know I am backed up by the superintendent of one of the largest of the Royal Asylums in Scotland, and he insists on all his patients, both pauper and pay, taking it for breakfast in the form of porridge with milk before they get anything else. One medical man informs me that in his district the wives are too lazy to make porridge for the men; they find it much less trouble to boil a pot of tea and give it to their husbands with white bread.

I have often heard it said that the eating of fish is a cause of insanity in this county. Fish, either fresh or salt, is eaten occasionally at dinner

Fish.

with potatoes in most parts of this district and washed down with tea; but there is not a vestige of proof that it ever caused insanity as far as I can make out, and I do not believe in it as a cause.

I only wish that it was more largely consumed, and that the fish which I am told are swarming in the seas round the coast could be caught and brought inland to feed the people.

It is a pretty general opinion that emigration has not been accountable for the transfer of mentally affected persons to the asylum who were previously maintained in their own homes, because emigration does not take away all the wage-earning members of families. In fact I am informed there are still plenty of wage-earners left in all parts of the county.

Emigration.

Upon this subject of emigration, however, I got some interesting and important replies, of which I give the following examples:—

The Most Rev. Patrick O'Donnell, D.D., Lord Bishop of Raphoe, writes: "Population must deteriorate in mind and body where so many of the strongest emigrate and nearly none of the weak." Mr. A. Mitchell, of Ramelton, says: "In my opinion the more serious effect has been the removal of the *healthy*, and, consequently, *by necessity*, increasing consanguineous and other undesirable marriages."

The Rev. Canon Baillie writes: "I fear the stronger members of families are those that emigrate, leaving the weakly ones at home who marry." The Rev. Charles McGlynn, F.R., puts it even more strongly: "I am of opinion that the great and principal cause of the increase of insanity is emigration. The bone and sinew, as well as the flower of our hard peasantry, go to America, Scotland, and the Colonies; the healthiest members of the family, male and female, go; those who are the most skilful at outdoor work have the best chances of succeeding abroad. Those who are best educated in the schools (I do not mean higher education, but in the National schools) strike out for themselves. The children who can learn little or nothing stay at home as a rule. The lame, the blind, the deaf and dumb, the cripple, the deformed, the idiot, those weak in constitution, in strength, vigour, and energy, and in general health, as well as in courage and determination of mind, stop at home. It is easy seeing that the offspring is thus deteriorating, not only physically but mentally, and if the drain of emigration is not stopped we will finally be mentally and physically a nation of imbeciles."

It cannot be denied that it is the flower of the population which emigrates; and granting this, the conclusion is obvious that the race must degenerate in mind and body if there is no immigration to counteract the drain of emigration.

The abuse of tobacco has been suggested to me as a possible and probable cause of insanity. I have no positive proof of this, but I think it right to mention it, and if possible it would be advisable in the future to collect statistics bearing on this suggestion.

The abuse of tobacco.

I take it for granted that it is generally admitted as proved that tobacco smoking and chewing by the young checks physical development in several directions, as, for instance, in weight, height, chest girth, and lung capacity, and more markedly in the latter direction than in the others mentioned.

It is but fair to conclude, I think, that if tobacco indulged in to excess has the above effects on the physical growth of youngsters, it may have a similar effect on the mental development.

LETTER-
KESBY
ASYLUM.

Dr. Johnston, of Stranorlar, says: "Tobacco smoking is now freely indulged in by youths from ten years old and upwards, and is very injurious to their physical well-being, and is, I fear, a factor in the increase of insanity."

The Rev. Monsignor Kearney, P.P., also considers the abuse of tobacco to have a very injurious effect on the nervous system.

The Rev. John Kinnear, D.D., writes:—"Indulgence in tobacco is a powerful auxiliary in the same direction (the increase of insanity). The alcohol of drink and the nicotine of tobacco, so generally and excessively indulged in, contribute unquestionably to help most materially the increase of lunacy, while to any candid observer these, especially tobacco indulgence, destroy nervous action, stunt the human stature, disfigure the whole physique, and neutralise moral tendency and power."

Other causes.

The other chief causes of insanity in this district are poverty, adverse circumstances, worry and anxiety, and various bodily diseases. Self-abuse (sexual), is I know very largely indulged in by the patients admitted here, but to what extent it may be a cause or symptom of their insanity I cannot tell.

Increase of
insanity.

4. The amount of *absolute* and *relative* increase in the insane population during the decade 1881 to 1891.

The asylum population increased by seventy-five persons from January 1st, 1882, to December 31st, 1891, but that does not prove any actual increase in the number of insane persons in the district.

To get a definite idea as to whether insanity has increased or not in the county, one must compare the Census returns of 1881 with those of 1891.

At the Census of 1881, in a population of 206,035, there were 670 persons returned as of unsound mind. At the Census of 1891, in a population of 185,635, there were 690 persons returned as of unsound mind. This shows at a glance that if the population had remained stationary, there would have been only an increase of twenty persons of unsound mind. Unfortunately, during the decade, the population fell by 20,400.

If the insane population had fallen off in the same proportion, there ought to have been only 603 persons of unsound mind at the Census of 1891; on the contrary, there were 690, or 87 more than there ought to have been. This surplus of eighty-seven cannot entirely be considered an *absolute* increase.

Deducting, however, the twenty actually proved by the Census of 1891 to have been added to the insane population, there remains still a surplus of sixty-seven persons to be accounted for. As the great majority of those who ought to know best consider that emigration cannot be held accountable for an increase of the insane in the district, I think the fairest thing I can do, so long as there is a doubt in the matter, is to portion out this number as best I can, considering a part of it as an *absolute* increase and part as a *relative* increase.

Therefore, as there can be no doubt about the *absolute* increase of twenty, I would on this account give thirty-seven of the surplus of sixty-seven to the side of *absolute* increase, bringing the number so accounted for up to fifty-seven in the decade, and the remaining thirty I would return as a *relative* increase or residue left by the flood of emigration as it ebbed from our shores.

If my figures can bide investigation, and I think they can, they prove an annual *absolute* increase in this district of 5·7, and although this looks a small number, still in the lapse of years the numbers mount up to a

serious total, and it becomes more serious when we consider that the population is falling at the rate of over 2,000 a year on the average. However if we take the *absolute* and *relative* increases together, matters appear still worse, for then we have an annual increase of 8·7.

LETTER-
KENNY
ASYLUM.

5. SUGGESTIONS FOR THE FUTURE.

I am afraid it is not an easy thing to provide remedies for the state of affairs pointed out in this report, especially when I believe heredity is accountable, at least indirectly, for 70 per cent. of the insanity in this district. The future.

Legislation can do little or nothing, in these days at all events, to stop men and women from marrying when they like and whom they like, nor can it put an end to tea and alcohol drinking or tobacco smoking when these are indulged in to excess. Immigration might do some good, but at present there is little chance of this agent being availed of. In the hands of the people themselves, as far as I can see, lies the sole remedy at present available to check the increase of insanity in our midst. That remedy is the education of the people on this subject.

Old and young, but specially the young, must have this subject brought before them in a forcible and plain and simple way. The youth of the country must have driven into their heads the truth about the misery they are likely, nay certain, to bring on themselves by marrying into a family tainted by insanity, and the heritage they are sure to bequeath to their innocent but helpless offspring. A practical suggestion has been made to me by Mr. W. H. Boyd, of Ballymacool, Letterkenny, which could easily be carried out and tried. He says:—"I think if some simple directions were printed on leaflets (similar to the sanitary directions circulated by Boards of Guardians) only dealing with the causes preventing degeneracy of body and mind, and warning people against bad habits and practices, and pointing out their harmful consequences, and if these were circulated throughout the country, especially in the remote districts, that it would direct attention to the matter, and might do some good."

He afterwards wrote saying—"Possibly a better plan might be to have some elementary teaching on the subject given to children in the National Schools; this would work slower, but probably more surely than the other, which could be auxiliary to it." This latter idea suggested itself to my mind before Mr. Boyd wrote to me. I would certainly advocate the teaching of elementary physiology, and lessons on the advantages and blessings of a sound mind in a sound body should be given to the senior pupils in our National Schools.

6. CONCLUSION.

In conclusion I would say that this subject is one of great importance, and should engage the attention of politicians without delay. Conclusion.

It is a sad fact, which every impartial observer must admit, that insanity is increasing steadily in this country. If the present state of affairs goes on for another decade, and the bulk of the increase is sent to the asylum, it is as clear as day that large additions must be made before long to this asylum besides those which are about to be commenced at the new year.

I remain, gentlemen,

Your obedient servant,

E. E. MOORE, R. M. S.

LIMERICK
ASYLUM.

LIMERICK DISTRICT ASYLUM.

Limerick, 29th December, 1893.

In the compilation of a report on the important subject of increasing insanity, much depends on the reliable data upon which the report is based.

I regret having to state considerable difficulty has been experienced in obtaining satisfactory information as to the cause of insanity from the meagre returns afforded by the asylum records consequent on the insufficient description derivable from the asylum forms. The tables have been made up with the utmost accuracy and care possible. To illustrate the difficulty to be contended with, I desire to draw particular attention to Table 4, under the heading of "unknown causes," I find 304 cases, or 28 per cent. of the entire admissions for the period under review have no cause assigned. In considering the question of the alleged increasing prevalence of insanity, it must be conceded it is real as well as apparent. That it is real is shown by the fact that there is a universal wave of insanity over the world, and, as civilization advances, insanity goes hand in hand with it. As a proof of this asylums are either being enlarged, or new ones built (to cope with this serious matter) in almost every country over the globe.

As to the apparent cause, it is an established fact asylums are now much more in favor with the people than they used to be years ago, and they are not so reluctant in sending their relatives and friends for treatment in preference to keeping them at home; besides every small village and town formerly had a number of harmless lunatics or idiots roaming about that at present are either in asylums or workhouses, and this cause has helped to increase the number of admissions.

Hereditary influence is the assigned cause in 208 cases, or nearly 20 per cent. of the admissions. In my opinion it is the principal factor in predisposing to insanity. During the period under review numerous instances of fathers and children, mothers and children, brothers, sisters, and cousins in legion have occurred among the admissions.

"Intemperance" is the assigned cause in 107 cases, or nearly 10 per cent. of the admissions. There is not a shadow of doubt abuse of alcohol swells our asylum population, not so much in country districts as in large towns and cities. As a rule, the habitual drunkard hardly takes any food; his whole sustenance depends on drink, and with an empty stomach after taking a few glasses of the vile poison generally sold as whiskey, he loses his senses, not due to the result of being so drunk, but simply (as the people style it) their brain goes on fire, and they are mad at the time. This goes on week after week, year after year, until the system is saturated with alcohol, and in the end the mental and physical condition is impaired to such an extent as to render admission into an asylum necessary.

"Masturbation" I look on as a fruitful source of insanity. I can call to mind many and many a case admitted within the past four years attributable to this cause.

"Emigration" is another important factor in adding to asylum population. In the face of a yearly decreasing population, it looks strange at first that insanity should be on the increase. It is not hard, however, to account for this—Ireland is almost purely an agricultural country, with no industries or factories to provide employment, for the people must and do live by agricultural labor. For years past the

youth of both sexes have never lost an opportunity of going to America. The old people were left at home dependent on the land, without assistance to work it properly, and what between wet seasons, and failure of crops, and weary of trying to make ends meet (for of late years but little money was sent home from America, owing to depression), ultimately broke down in mind, and body.

(Signed),

EDWARD D. O'NEILL.

LIMERICK
ASYLUM.

LIMERICK DISTRICT LUNATIC ASYLUM.

Limerick, 29th December, 1893.

GENTLEMEN,—I beg to enclose report and tables on the alleged increase of insanity in Ireland within the last ten years.

I am, gentlemen,

Your obedient servant,

E. D. O'NEILL, Medical Superintendent.

The Inspectors of Lunatics,
Dublin Castle.

LONDONDERRY DISTRICT LUNATIC ASYLUM.

Londonderry, 29th December, 1893.

LONDON-
DERRY
ASYLUM.

GENTLEMEN,—In reply to your circular letter dated 7th December, 1893, I beg to forward you herewith the tabular statements as required, which I trust you will find correct, and to report:—

Under the heading of "admitted as insane, and descended from former inmates of the asylum who had been discharged recovered," I can only find one who I consider a case in point (there are cases of children and parents both being inmates under other circumstances).

As causes of increased insanity I consider:—

- (a). Intemperance in drink.
- (b). Hereditary influences.
- (c). Intermarriages of those with insane tendencies.
- (d). Abuse of tea drinking (particularly in cases of persons employed in sedentary occupations).
- (e). Ether drinking, this is stated to be the cause in two females, but I have no doubt it was in other cases an exciting cause, the custom of ether drinking I have reason to believe is much reduced.
- (f). Emigrants landed here not belonging to the district, but placed in the asylum, and this subject is at present engaging the attention of the Governors here. We have at present of this class three males and one female.

LONDON-
DERRY
ASYLUM.

I have made inquiry and cannot find that the emigration of the "wage earners" has caused those dependent on them to be removed to the asylum.

There has been a change in the Dietary of the people, tea and bread taking the place of porridge and milk, and more meat and bacon is used.

The general type of insanity I consider changed, the tendency being for patients on admission to be more of the melancholic class, and their bodily health enfeebled.

I remain, your obedient servant,

CHAS. E. HETHERINGTON, Res. Med. Superintendent.

To the Inspectors of Lunatics.

MARY-
BOROUGH
ASYLUM.

MARYBOROUGH DISTRICT ASYLUM.

REPORT ON INCREASE OF INSANITY IN ACCORDANCE WITH CIRCULAR OF INSPECTORS OF LUNATICS, DATED 7th DECEMBER, 1893.

In immediate connexion with the question of causation by heredity I believe that the improved and more successful system of asylum treatment of recent years may have contributed somewhat to the increase of insanity, causing as it has done, an increased number of discharges. Some of these returning after a few years absence, having in the meantime contracted marriage and borne children.

It is therefore only to be expected that such children with hereditary taint, will themselves or their children develop symptoms of insanity.

With regard to the change of diet it is quite apparent that the average countryman has deteriorated physically during the past 20 or 30 years, which deterioration can only be attributed to change in diet and mode of living. Such food as stirabout and potatoes no longer holds a place as a standard diet amongst the Irish peasants. The former is now almost discarded, and has been replaced by a more stimulating and less nutritious diet, viz.—Tea, which is taken in large quantities at all meals of the day. The tea used by the Irish peasant must be very injurious, both physically and mentally, as that made by them is simply an infusion, and in many cases a decoction of tannin.

Their usual mode of making tea being to put a large quantity of tea in the teapot early in the morning, water being added as required, and left to infuse at the fire all day.

With such a marked change in the diet, and when a good and wholesome food as stirabout has been supplanted by one so detrimental we may expect the men and women of the present age to be physically weaker, and it may then be natural to suppose that if there be but the slightest taint or trace of hereditary insanity, it is certain to manifest itself in some phase or form.

Intemperance I believe to be one of the principal causes of insanity, owing to the adulteration of all kinds of drink, and is chiefly harmful, under certain conditions, as when taken in large quantities by persons who are sustained by a diet as above, which is so deficient in nutrition.

That a larger quantity of inferior alcohol is consumed by the Irish peasant than in years gone by cannot be denied.

With regard to emigration being a cause, the increase in this way can easily be accounted for, and there is little doubt that emigration has helped to add to the numbers in our already too full asylums. When the stronger members of a family emigrate they frequently leave behind them a poor, harmless creature with none but in many cases an old and infirm father or mother, who is unable to mind them or provide for their wants, and who, being unable to do so, must adopt either of two courses, viz., to send them to the workhouse or asylum, where they are doomed to spend the rest of their life, adding to the great number of such cases which have been *accumulating*, and for whom there is no chance of recovery.

Another cause for the increase of insanity is, I believe, the excessive use of tobacco amongst the young.

J. H. HATCHELL,

Resident Medical Superintendent,

29-12-'93.

District Asylum, Maryborough.

MARY-
BOROUGH
ASYLUM.

MONAGHAN DISTRICT ASYLUM.

MONAGHAN
ASYLUM.

District Lunatic Asylum,

Monaghan, 29th December, 1893.

GENTLEMEN,—In compliance with your communication of the 7th instant I beg to forward, herewith, the several Tables specified.

With regard to Table showing cause of Insanity I have no doubt but advantage is taken of Asylum treatment in recent years to a greater extent than formerly, owing to the improved system of treatment.

The Asylum has been in existence for so comparatively short a period that there are not, so far as I know, any inmates descended from persons who had been formerly patients.

Abuse of alcohol is debited with about one out of every fifteen of the admissions. Although I have little data to go upon I would be disposed to attribute some considerable share of causation to the excessive use of tea.

With reference to the subject of the indirect effects of emigration I have really no information.

I am, gentlemen,

Your obedient servant,

ED. TAYLOR,

Resident Medical Superintendent.

The Inspectors of Lunatics, Dublin Castle.

MULLINGAR
ASYLUM:

MULLINGAR DISTRICT ASYLUM.

23rd January, 1894.

GENTLEMEN,—In forwarding you the following report on the alleged increase of insanity in this district, I have carefully considered each of the points to which you have directed special attention to in your circular of the 7th of December, 1893. Having referred to the case-books and other official records at my command, I much regret being obliged to admit that I cannot furnish any striking facts bearing on the subject you are about to investigate.

I may at once point out that although there has been an annual increase in the number of patients under care and treatment in this Asylum during the past ten years, there has not been any material increase in numbers of first admissions or occurring cases of insanity in the same period. Having in view, however, that the general population of this district has diminished during the past decade, and the fact of the primary admissions remaining constant, it would appear to indicate that there is a slight increase in the number of insane persons to the existing population.

A minute analysis of the records at my disposal does not clearly account for the accumulation of patients which has taken place in this Asylum during the past ten years, and I am unable to adduce any better reason than that the discharges and deaths have not equalled the admissions (including re-admissions and transfers).

On reviewing the history of the admissions as detailed in the case-books, I cannot discover any definite indication that the improved treatment of the insane in latter years has contributed to the number under treatment, but I have noticed an obvious desire on the part of the relations, and even of insane persons, to take advantage of early treatment in the Asylum when symptoms of insanity became manifest.

An intemperate use of alcoholic liquors has not been a marked feature in the history of the admissions to this Asylum during the past ten years, but an inordinate consumption of indifferently prepared tea appears to have been introduced largely into the ordinary diet of the majority of the patients coming under treatment.

I have endeavoured to collect some facts bearing on the influence of emigration from this district as a cause of the accumulation of patients here, but in the absence of reliable emigration returns, which I have failed to procure, my attempt has been unsuccessful. It is, however, a curious coincidence that of the male patients at present under treatment 13 per cent. have been abroad. A few of these served as soldiers in India, but the majority have returned from America after varying periods of residence, and having failed to establish a home there.

I have the honour to be, gentlemen,

Your obedient servant,

ARTHUR FINEGAN,

Resident Medical Superintendent.

The Inspectors of Lunatics.

OMAGH DISTRICT ASYLUM.

OMAGH
ASYLUM.

GENTLEMEN,—I beg to submit the following report on the alleged increase of insanity in Ireland, so far as it relates to this district, with the several tables as requested in your circular of 7th December, 1893.

1st.—As to the increase of the rate of insanity in this district, as indicated by the Asylum records during the ten years ending 31st December, 1892, taking the admissions, discharges and deaths for each year, and the average number resident for each year, a steady increase is shown from an average number resident in 1883, of 520, to an average number of 573, in 1892—that is an increase of 53.

2nd.—If we take the return of first admissions for the ten years ending 31st December, 1892, giving an average number of 114.6 for each year as a guide, it would not appear that lunacy was largely on the increase in this district, but considering the fact that the population of the two counties, Tyrone and Fermanagh, has fallen from 286,698 in 1881, to 245,571 in 1891, we are forced to a different conclusion, and this is strengthened by a comparison of the number of first admissions to this Asylum, in the ten years ending 31st December, 1882, with the number of first admissions in the ten years ending 31st December, 1892, viz. :—

| | |
|--|-------|
| First admissions from 1st January, 1873, to 31st | |
| December, 1882 | 995 |
| First admissions from 1st January, 1883, to 31st | |
| December, 1892 | 1,146 |

That is an increase in first admissions of 151 during the past ten years, or taking the population as given in 1891, an increase of first admissions of 1.2 in every 10,000 of the population.

I regret extremely that I have no means of ascertaining the exact population of the district, during the 10 years under review, consequently I cannot give the proportion of the first attacks to the population.

Under the causes of insanity, though a very large percentage are entered under hereditary influence, I cannot trace any patient as descended from a parent who was treated to recovery in this or any other asylum; that we have had and still have children of former patients in the asylum is beyond question, but, so far as I can learn, they were born before the parents came into the asylum.

The present system of taking unrecovered patients out on bail is in my opinion very likely to add largely to the number of the insane in future years.

The abuse of alcohol has exercised a very great influence in the causation of lunacy in this district. The use of ether has also been stated to have increased the numbers greatly, but, strange to say, though in part of the county of Tyrone, the use of ether was at one time very great, in not one single case was it stated to have been the exciting cause.

That the dietary of the people has not improved by the constant use of tea is patent to every one; milk and porridge, which used to be the staple dietary of the people, is now put aside for tea (in many cases without milk) and bread, not often of the best quality.

Emigration has, I consider, been to a great extent the apparent cause of the increased number of lunatics to our present population, as the strong and healthy have been induced to leave the country, leaving behind the weak, feeble, and delicate members of the family.

OMAGH
ASYLUM.

In this way our lunatics represent a much larger population than the present census returns would lead us to expect; but, I cannot say that patients have been sent to this asylum, because the wage earning members of the family emigrated.

If I can in any way afford you any further information, please let me know, and I will at once attend to it.

I have the honour to be, gentlemen,

Your obedient servant,

GEORGE EDWARD CARR,

The Inspectors of Lunatics,
Dublin Castle.

RICHMOND
ASYLUM.

RICHMOND ASYLUM, DUBLIN.

Richmond District Asylum,

Dublin, 7th day of February, 1894.

GENTLEMEN,—Herewith I have the honour to forward the information required in your letter of December 7th, 1893.

I much regret the imperfection of the Tables. For some of the years reported on, notably 1884–1885, no information under certain heads is forthcoming.

The Table of Causes was the occasion of much delay. Owing to the fact that for many years it was the custom to distribute cases according to predisposing and exciting causes, and thus make one case figure under two or more heads, it became necessary to go over every case again.

I have the honour to be, gentlemen, your obedient servant,

CONOLLY NORMAN.

The Inspectors of Lunatics, Dublin Castle.

REPORT ON INCREASED PREVALENCE OF INSANITY.

The actual increase in the number of persons of unsound mind under treatment in this Asylum during the last ten years has been remarkable; from 1,055 at the end of 1883 to 1,467 at the end of 1892. However, after considering the matter at great length, I cannot satisfy myself that the facts before me show any very marked increase in the tendency to insanity among the inhabitants of the district.

The following points suggest themselves to me as largely accounting for the increase referred to:—

1. The prejudice against sending patients to an asylum, originally very strong in this country, is dying out, and at the same time—
2. People are becoming less tolerant of a person of unsound mind in their midst.

Hence the relatives of patients who would at one time have been kept at home now send them to the asylum.

3. The Poor Law authorities are becoming convinced that their work-houses are unsuitable places for the detention of the insane, and they not

only send to the asylum a pretty steadily increasing number of lunatics annually, but they also refuse to receive imbecile cases whom they used some years ago to take in large numbers from the asylum.

4. The increase is almost wholly confined to the urban population of the city and county of Dublin. The population of this division of the district is increasing. But it must be also borne in mind that a metropolitan district will naturally contain a large floating population—a class particularly liable to suffer from disappointment, destitution, and reckless living, factors that singly or combined contribute powerfully to the production of insanity. From my own observation I should say that this class is distinctly increasing in Dublin of late years. No doubt the unfavourable condition of agriculture and the improved means of communication tend to bring into the town area increasing numbers of needy country people. Waifs and strays of all kinds contribute to swell the drift population which is probably increasing and may be expected to increase. Owing to the absence of any law of settlement, and to the working of the "Dangerous Lunatics Act," members of this class who become insane in the metropolitan district are detained in this asylum.

5. The death-rate in this asylum declined remarkably a few years ago, and remained for some time below its former level. In spite of certain very unfavourable circumstances this declension was probably due "to the improved and more successful system of asylum treatment of recent years." This accounts for a very considerable accumulation of patients. The following table shows the percentage of deaths on the total number under treatment for each of 22 years:—

TABLE showing for (the years 1871-92 the proportion per cent. on the admissions of patients discharged as "recovered"; and the percentage of deaths on the total number under treatment.

| Years. | Percentage of Recoveries to Admissions. | Percentage of Deaths to Total Number. |
|---------------|---|---|
| 1871, | 47' | 8'5 |
| 1872, | 52' | 8'9 |
| 1873, | 49' | 8'5 |
| 1874, | 41' | 8' |
| 1875, | 45' | 9' |
| 1876, | 44' | 10' |
| 1877, | 44' | 11' |
| 1878, | 45' | 11'9 |
| 1879, | 44' | 13' |
| 1880, | 39' | 9'7 |
| 1881, | 37' | 10'9 |
| 1882, | 35' | 10'4 |
| 1883, | 34' | 10'2 |
| 1884, | 28' | 9'8 |
| 1885, | 28' | 8'9 |
| 1886, | 30' | 10' |
| 1887, | 28' | 7' |
| 1888, | 34' | 5'8 |
| 1889, | 29' | 5'9 |
| 1890, | 22'8 | 9'1 |
| 1891, | 29'6 | 6'6 |
| 1892, | 34'8 | 9'5 |

RICHMOND
ASYLUM.

6. The above table also shows a marked falling off in the recovery rate as calculated upon the admissions. This may be due in part to local unfavourable conditions (overcrowding, &c.)

7. But I have no doubt that the class of cases which are admitted to asylums in this country of late years is not as favourable as when I first began to be acquainted with the insane. It is true that a certain apparent or rather proportional diminution in the number of acute cases may be due to the fact that relatively tranquil cases are now sent to asylums, which often would not have been sent some years ago. But, making allowance for this, I am still of opinion that a smaller number of hopeful cases come under our notice. True acute mania, the most curable of forms, has become comparatively rare; melancholia is increasing in frequency, and also primary mental deterioration. "Organic" brain diseases also (general paralysis, &c.) are undoubtedly becoming more common.

The considerations above mentioned deal mostly with the interpretation of statistics, and with conditions that may be called local. The last point (7) suggests serious fears. To say that more unfavourable forms of insanity are commoner than they used to be, is not identical with saying that insanity is more prevalent; yet the former fact would probably lead to the latter, and both are likely to be dependent upon common causes.

With regard to heredity, I have not any sufficient body of specific facts to throw light on the question of whether improved treatment of the insane may not indirectly tend to perpetuate, or at least increase, the prevalence of insanity. Of course it is not infrequent that the children of former patients become themselves patients here, but it is not infrequent that the parents of patients have been insane, and have recovered without asylum treatment. Minute and accurate observation and most carefully kept statistics, extending over a long number of years, would be needed to be of any practical or scientific value in this matter. These are not forthcoming here, and so no definite conclusion can be arrived at. Vague "impressions" on such subjects are most misleading. When analysed, they are often found to depend on one or two striking but perhaps quite exceptional cases.

It may help in the elucidation of this point to remark that in any case the improved treatment in asylums, viewed from the standpoint of heredity, does not operate entirely in one way. It is true that on one hand cases are rescued from death, are treated to recovery, and are returned to society, who might in earlier times have perished or have been subjected to life-long confinement; but, on the other, the injury which might accrue to the race is probably fully counterbalanced by the fact that a very much larger proportion of persons of unsound mind are sent to asylums than formerly; in other words, there are not so many lunatics at large as there used to be.

With regard to *alcohol*:—In this, as in every district containing a large urban population, many cases are admitted in which insanity arises directly from drink, and doubtless very many more in which the association is indirect. I do not think that drink is an increasing cause, distinctly the reverse. That it is more frequently recognised now than formerly is true, but this is due in part to the fact that our knowledge is more extensive and our observations more exact, in part to the circumstance, confirmed by general observation of the population, that the people drink less than they used, are more sensible of the ill-effects of alcohol, and therefore more inclined to attribute their own or the relative's illness to this cause when it exists.

CONOLLY NORMAN.

SLIGO DISTRICT ASYLUM.

SLIGO
ASYLUM.V.—*Heredity.*

I have no specific facts to give such as are asked for under this heading.

If the truth could be got at, I believe hereditary taint would be found in a much greater number of cases of insanity than at present appears in returns, but it is almost impossible to get at the truth of this matter, because relatives will deny in the most positive manner that there is insanity in the family.

Alcohol and Dietary.

I am of opinion that alcohol gets the credit—if I may use the expression—of being the *direct* cause of insanity out of all proportion to its merits.

No doubt it does excite insanity in those already predisposed thereto, but it is more often a sequel, than a cause, of insanity.

It is popularly believed that the consumption of tea is a fruitful cause of insanity; but in my opinion it can only affect persons indirectly as alcohol does.

From the opening of the asylum at Letterkenny up to the time I left—nearly twenty years—no person was admitted into the asylum from Tory Island, a place notorious for inter-marriages, and the manufacture of potheen.

Similarly, no person has ever been sent to the Sligo Asylum (opened in 1852), from Innismurray Island, which has a reputation the same as Tory, but on a smaller scale, owing to its smaller size and smaller population.

VI.—*Emigration.*

I am unable to say how emigration may have influenced the transfer to asylums of the mentally afflicted in former years, but in later years I do not think it has affected this question.

Emigration or no emigration, people are only too ready to send their mentally afflicted relatives to asylums nowadays, the prejudices against the latter having to a great extent, disappeared.

JOSEPH PETIT,

R. M. Superintendent.

Asylum, Sligo,

29th December, 1893.

WATERFORD DISTRICT ASYLUM.

WATERFORD
ASYLUMSPECIAL REPORT ON THE ALLEGED INCREASE OF INSANITY as it affects the
WATERFORD DISTRICT.

To the Inspectors of Lunatics, Dublin Castle.

GENTLEMEN,—In response to your Circular on the above subject, dated the 7th December, 1893, I beg to forward the accompanying series of statistical tables bearing on the alleged increase of insanity, in

B

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ASYLUM.

so far as it affects this district, together with the following explanatory observations:—

It will be seen from Table I. that on the 31st December, 1882, there were in this Asylum, a total of 286 insane individuals. The Census of the previous year gave as the population of the county and city of Waterford—which comprise the district—112,768, and there were therefore for every thousand of these 253 insane persons. During the succeeding decade—1882-92—the asylum population increased by 97, there being on the 31st December, 1892, 383 persons under cure. The Census of 1891 showed that during this decade the population of the district had decreased by 14,517, leaving it at 98,251, and therefore for every thousand of this reduced population there were 389 insane persons. Had the population not undergone this remarkable diminution, the apparent increase would only have been about 0.85 per thousand. It may of course be said that if the 14,517 had not disappeared, a certain proportion of the number would have become insane, and therefore added further to the ratio. This is of course to a certain extent true, but at the same time it must be remembered that the diminished population is largely due to emigration, and that it is generally the younger and healthiest of the people who emigrate, and who, had they remained at home, would have been the least likely to become, under ordinary circumstances, the subjects of mental disease. In analysing the addition (97) which has been made during the decade 1882-92, to the asylum population, the question at once arises, is this due to an accumulation of old cases, or does it indicate an actual increase in the primary cases of insanity, occurring in the district. An examination of the figures set down in Table II. largely answers this question. In this table the first admissions to the asylum, on which it is evident the only reliable data can be founded, are set down in sequence year by year, for the eleven years from 1882 to 1892, the former and the latter years being included, and on running the eye over these figures, it will be at once observed that there has been no regular annual *pro rata* increase. Taking the first admissions of 1882, as a basis for comparison, it is found that in 1883, these had decreased by six, in 1884 there was an increase of seventeen, in 1885 the comparative increase was twelve, in 1886 there was a decrease of ten, in 1887 the decrease was three, and in 1888 it numbered nine. For the succeeding four years 1889-90-91-92, there were increases over the first admissions of 1882, of 10, 10, 5 and 3. From this it is evident that there has been an increase, especially during the past four years in the numbers of persons admitted as insane for the first time, though not necessarily recent or acute cases, as many were congenitally defective or imbecile from youth. This increase, however, would not by itself at all account for the augmentation of the asylum population, which has occurred in the same period of time, and this augmentation can only be satisfactorily accounted for by the gradual accumulation of patients, the annual admissions always largely exceeding the combined discharges and deaths, the difference representing the remnant which has accumulated, and still goes on accumulating. That this is so, the following figures show. The total number of first admissions for the eleven years dealt with, amounted to 656, in the same period 238 re-admissions were registered. Of this total of 894 cases, 661 were removed by discharge and death, leaving 233 still registered at the end of 1892. Of the 286 resident at the close of 1882, 150 were still in the asylum at the close of 1892, and these, plus the remnant of 233 above alluded to, made up the 383 persons resident on the 31st December, 1892, and thus I think the effects of accumulation are rendered plainly evident.

In order to estimate the ratio of the primary admissions at the different epochs of life, from youth to advanced age, to the population—for the purpose of estimating the ratio yearly—I have assumed that the population has decreased in the same proportion each year for the decade between the censuses of 1881 and 1891. Averaging the ratios obtained (*vide* Tables III. and IV.), over the eleven years, and again taking 1882 as a basis of comparison, I find there was an increase in the ratio of cases up to fifteen years of age; an increase between the ages of fifteen and twenty-five; a decrease between the ages of twenty-five and forty-five; an increase between the ages of forty-five and sixty-five, and a decrease in the ratio of cases over sixty-five. The ratio for all ages is represented graphically in Table IV.B, and the decimal figures correspond to those at foot of columns in Table IV.A.

As regards the duration of the mental disease prior to the admission of the patients to the asylum, the available data are so imperfect and so unreliable, from the paucity of the information supplied, that no sound statistical conclusions can be drawn therefrom. Speaking generally, however, I am strongly of opinion, that since facilities of communication between outlying localities and the asylum have been established, since admission to the asylum has been facilitated, and since confidence in asylum treatment has been created, patients are admitted in much earlier stages of the disease than was formerly the case, and further than this, many cases are admitted and thus registered, which, owing to obstacles now removed, would never have been sent to the asylum, and therefore never taken account of in estimating the statistics of insanity, and this increment must not be lost sight of in determining the extent and real importance of the alleged increase in the malady. Of the 656 first admissions, 128 were sent to the asylum from the various workhouses in the district, and not a few of these were transferred to secure for them the benefit of the four shilling rate in aid. These facts appear to me to account for, in large measure, the slight increase which has been above recorded, without having to presume that special causes are in operation, tending, now more than formerly, to foster the growth of mental maladies and degenerations. Doubtless the conditions to which I have above alluded do not operate to such an extent, or may have already exhausted themselves in purely urban districts; but this is not yet so, in largely rural districts such as this, where railway communication has been established only within little more than a decade, and that solely by a main line, leaving extensive areas at either side still comparatively difficult of access. I am aware also, that it is only within the past few years that the country people residing in such outlying localities are beginning to realise what the asylum is like as a place of residence, and in consequence they now more readily agree to send their friends who may become mentally afflicted to its care. I greatly regret that I am in a position to afford but scanty information as to the causes of insanity in this district; the information supplied on the committal forms on this point is so meagre, and my efforts to obtain information from the friends of the patients, or those in charge of them, so futile, that no data exist on which to found a really reliable table of causation. Of the 656 cases of first admission during the eleven years, 99 are set down as due to hereditary taint, but I am of opinion that could accurate information be obtained of the family history in each case, the numbers due to this cause would be largely increased. In the endeavour to obtain such information I wrote to the parish priests of the most important localities in the district, sketching the nature of the inquiry, and soliciting the aid which their

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local and special knowledge might afford, but I regret that up to the present my letters have met with no response. A considerable proportion of the patients admitted come from the Dungarvan and Kilmac-thomas districts, and from what I have heard in a general way I have some reason to believe that family intermarriages are of by no means infrequent occurrence in these districts, and the results of this may account in a degree for the large proportion of cases drawn therefrom. Cousinship in some degree of affinity is not uncommon amongst the patients, and the similarity of the environment of the related families contracting marriages may have a further influence in the lowering of the mental resistance of the offspring. Of the 656 first admissions 148 are set down as being due to "intemperance," that is about one-fourth, or at the rate of 25 per cent.; but this also, owing to the reticence of friends, and the difficulty of ascertaining facts, falls, I believe, considerably short of the actual ratio, and I would say that up to 35 per cent. may be fairly set down as the proportion of cases due to alcoholism in this district—urban and rural.

As regards the influence of any change of habits or of dietary in the production of insanity, no facts are within my knowledge which would enable me to form any definite opinion; judging, however, from my general acquaintance with the people, both in the town and country, I do not think that there has been within recent years any change either in habit of life or in dietary which would be sufficient to account for any increase whatever in the product of insanity. It is probable that the consumption of tea by the peasantry has increased of late years, but the general influence of this in the causation of mental derangement is still too problematical to warrant any definite opinion being formed thereon.

As regards the question of emigration there can be no doubt but that many of the strongest and best, both physically and mentally, have left the country, and though the influence of this in the causation of insanity is not very apparent, yet I am inclined to believe that it has had a tendency in that direction, not so much by removing wage-earning and supporting friends from those already mentally affected, or with a tendency thereto, necessitating the seeking by the latter of shelter in the workhouses, and their subsequent transference to the asylum, but rather by its direct depressing effects on the members of the families remaining at home, especially on the more impressionable female members, who take more directly to heart the loss or permanent absence of those whom they loved, and this condition of depression and grief may, under additional and it may be slight exciting causes, pass the borderlands of sanity. The figures and facts above set forth seem to me to justify the following conclusions as to the prevalence of insanity in this district:—

1. The increase in the asylum population during the last decade is most largely due to accumulation.

2. There has been a small but irregular increase in the cases of 'first admission' during the same period, but the external causes which might account for this, viz.:—(a) Facility of communication; (b) increased confidence in asylum treatment; and (c) the existence of the Government capitation grant have not yet exhausted themselves, and have been operative during the period dealt with.

3. That hereditary degenerative tendencies play an important part in the causation of insanity, and that the marriage of near kin, affected by the same environment, is not without its influence in the production of transmitted degeneration.

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4. That from 25 to 35 per cent. of the cases of insanity are directly due to alcoholism

5. That emigration by the removal of the 'fittest,' and the depressing influences of this removal on the mental organizations of those who remain, is, in some measure, responsible for the production of insanity.

I am, gentlemen, your obedient servant,

RINGROSE ATKINS, M.D.,
Resident Medical Superintendent.

District Lunatic Asylum, Waterford,
26th December, 1893.

APPENDIX H

CIRCULAR RELATING TO GOVERNMENT GRANTS.

GOVERNMENT
GRANTS.CIRCULAR to RESIDENT MEDICAL SUPERINTENDENTS of
DISTRICT LUNATIC ASYLUMS in IRELAND.

No. 3204.

Dublin Castle,
16th March, 1893.

SIR,—I am directed by the Lord Lieutenant to state, for the information of the Board of Governors of your asylum, that representations have been made to the Irish Government by the Board of Control and the Inspectors of Lunatics that the great increase of lunacy in Ireland renders necessary largely increased accommodation in nearly all the asylums, and that it would tend to the relief of the ratepayers if the period for the repayment of loans for lunatic asylum buildings was extended over a longer term of years, and the repayment annuity in respect of such loans thereby reduced in amount.

The Lords Commissioners of Her Majesty's Treasury have had this matter before them, and have now, moved by the strong representations of the Irish Government, notified that they are prepared to consider favourably any recommendation which the Commissioners of Control may put forward for extending to twenty years (the maximum allowed by statute) the period within which loans made hereafter for the erection of lunatic asylums are to be repaid. This concession will apply to all loans in the case of which annuities have not yet been struck, including those where works are still in progress. Their Lordships are unwilling to extend the term by a general order in the case of all asylum loans, as some of them are of comparatively small amounts, and probably for works—such as repairs or fittings—for which the present period of fourteen years appears sufficient.

Their Lordships have also recently directed the attention of the Irish Government and the Lunacy Department to the large and continuing increase in the amount annually required as the grant-in-aid of pauper lunatics; for example, the amount voted for the year 1892-93 showed an increase over the previous year of £4,099, while the estimate for 1893-94 again shows an increase of £4,220.

The Inspectors have pointed out that these increases were simply proportionate to the increased number of patients for whom the capitation grant was calculated.

The question, however, evidently suggests itself that, in view of the large amount of vote has now reached, Boards of Governors should endeavour, so far as they reasonably can, to obtain payment from the friends of inmates liable, or willing to defray the cost of their maintenance in district asylums.

The Irish Government desire to record their approval of the efforts which have, as they learn from the Inspectors' Reports, been made by several of the asylum boards to raise the standard of the care and comfort of the patients, a course which must tend towards the more lasting amelioration and cure of the insane. From one or two, however, of these reports it would appear that a few of the local authorities

do not fully recognize the condition under which the Imperial contribution is from year to year continued, viz. :—That it is awarded not only as a measure of relief from local taxation, but as a means of improving the general treatment of the insane poor.

That the grant still fulfils the first of these conditions is shown by the fact that, while the total expenditure on the maintenance of pauper lunatics has risen from £190,511 in 1874 (when the Grant was first made), to £272,616 in 1891, the incidence of this sum on the local taxation in the latter year amounted to £159,502, or a decrease (notwithstanding the large increase in the number of the insane) of £31,000; in other words, the Ratepayers throughout Ireland had to contribute in 1891, £159,502 for the maintenance of about 11,500 pauper lunatics, while in 1874 they had to contribute £190,511 for the maintenance of 7,500.

Dealing with the second condition attached to this large and generous contribution from the Imperial Exchequer, the Irish Government are of opinion that the standard of cure and comfort recognised in other countries as being essential for the successful treatment of the insane poor, should be maintained throughout Ireland, and if they were satisfied that in any case such standard of treatment was persistently refused, it would be incumbent on them to take steps to have withheld from such district the whole or part of the Grant-in-aid, which consists of money voted annually by Parliament.

I am, Sir, your obedient Servant,

D. HARREL.

GOVERNMENT
GRANTS.

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